

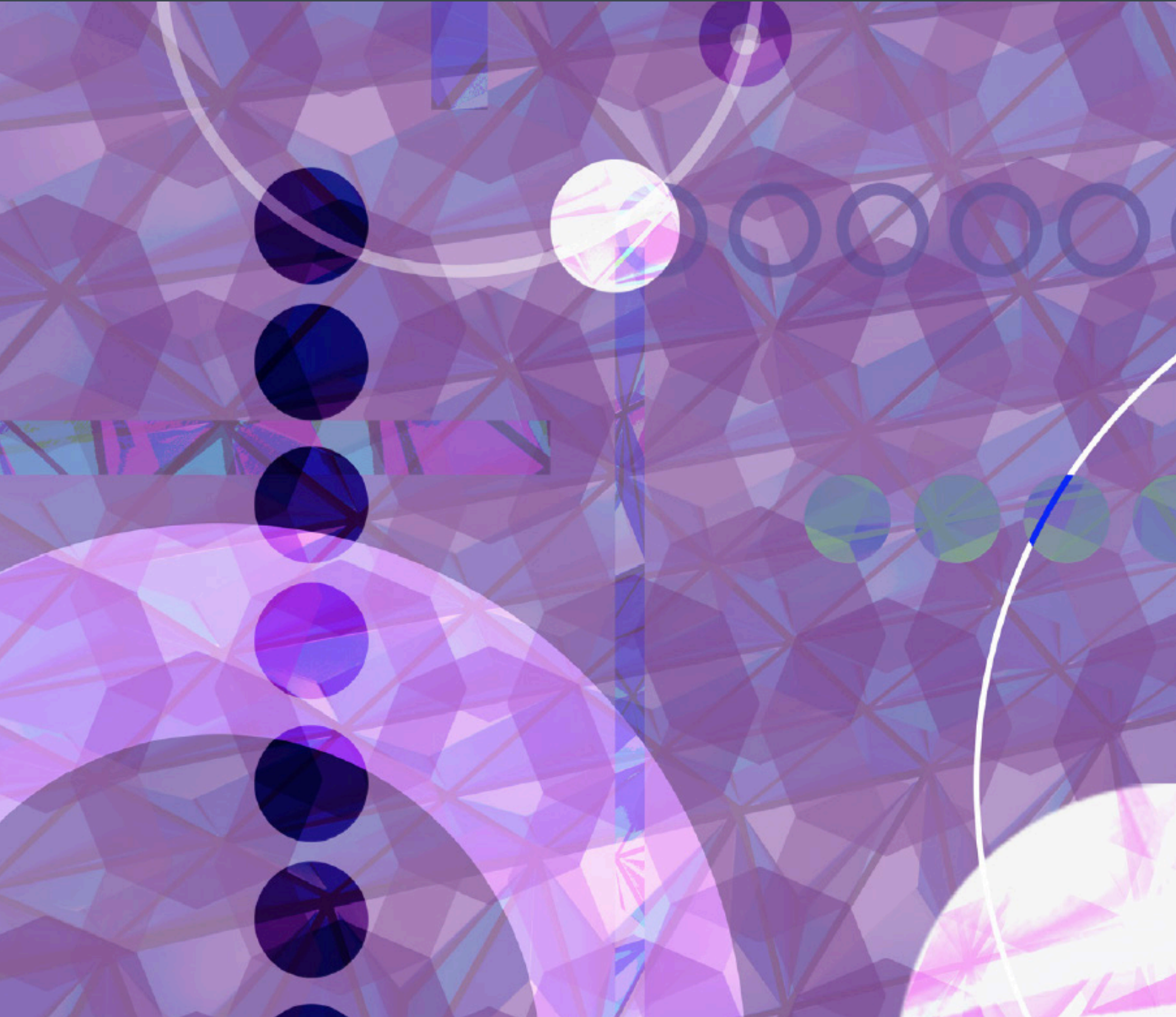
Criminal Justice Project: Drug Interventions Programme

DIP Activity in Wirral (2019/20)

December 2020



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KEY FINDINGS

- Between April 2019 and March 2020, there were 598 Criminal Justice Intervention Team (CJIT) contacts recorded by the drug and alcohol treatment provider in Wirral. This is a 38% decrease on the previous year and the lowest number of CJIT contacts between 2016/17 and 2019/20.
- Just over three in five CJIT contacts were Required Assessments (n=368; 62%), while 120 (20%) were voluntary presentations following release from prison and 110 (18%) were other criminal justice routes.
- Over half of the CJIT contacts in 2019/20 were taken onto the CJIT caseload (n=337; 56%), while 103 (17%) were already case managed by the treatment provider, other CJIT or Offender Manager, and 96 (16%) required no further intervention.
- The majority of Wirral CJIT contacts in 2019/20 were Wirral residents (n=569; 95%).
- Just over four in five individuals who were Wirral residents were men (n=372; 82%).
- Just under one in five individuals were aged 25-29 years (n=81; 18%), followed by clients aged 30-34 years (n=79; 17%).
- Over one-third of the Wirral residents considered themselves to have a disability (n=181; 36%).
- Around two in five had some form of a housing problem (n=220; 39%), with 92 (16%) stating an urgent housing need due to being of no fixed abode.
- Around half of the CJIT contacts in Wirral reported non-opiate drugs as their main substance (n=288; 51%), followed by opiate drugs (n=241; 42%) and alcohol (n=40; 7%).
- Two in five CJIT contacts reported heroin as their main substance (n=227; 40%), followed by cocaine (n=194; 34%). Just under half reported crack as their second substance (n=212; 47%), while around two in five reported drugs categorised as 'other' as their third substance (n=50; 41%).
- Around half smoked their main substance (n=281; 49%), followed by one-third whose route of administration of their main substance was intranasal (n=190; 33%).
- Just under two-thirds stated that they had never injected (n=360; 64%), while 157 (28%) had previously injected but were not currently and 43 (8%) were currently injecting.
- Just over two in five men reported consuming alcohol in the 28 days prior to their CJIT assessment (n=195; 42%). Of these, just over two in five consumed 7-15 units of alcohol daily (n=82; 42%), followed by around one-quarter who consumed 16-24 units (n=50; 26%).
- Around two in five women reported consuming alcohol in the 28 days prior to their CJIT assessment (n=43; 41%). Of these, over one-third consumed 7-15 units of alcohol daily (n=16; 37%).
- Three in ten reported theft - shoplifting as the offence that prompted their current or most recent contact with the criminal justice system (n=163; 30%), while 129 (23%) were Misuse of Drugs Act offences.
- Of the clients taken onto the CJIT caseload, 150 were referred to structured treatment in 2019/20 (130 individuals).
- In 2019/20, a total of 651 recovery support sub-intervention assessments were carried out on clients on the CJIT caseload (287 individuals), with a total of 1,522 sub-interventions delivered.

The Drug Interventions Programme (DIP) in England has an overarching aim to identify and engage with offenders in the criminal justice system who use drugs and/or alcohol, and encourage them towards appropriate treatment services in order to reduce acquisitive crime. There is a body of evidence supporting the DIP process at reducing offending for this population (Collins et al., 2016; Collins et al., 2017; Cuddy et al., 2015; Public Health England and Ministry of Justice, 2017). Under Merseyside Police's targeted drug testing process in the custody suites, if offenders test positive for specified Class A drugs (opiates and/or powder/crack cocaine) they are required to undergo a Required Assessment (RA) with a Criminal Justice Intervention Team (CJIT) worker. There are other referral routes into DIP, including: Conditional Cautioning; requirement by the individual's Offender Manager; court mandated processes, such as Restriction on Bail, pre-sentence reports, Drug Rehabilitation Requirements and Alcohol Treatment Requirements; and voluntary presentations.

In October 2013, the Home Office decommissioned DIP as a national programme and Public Health England (PHE) took responsibility for collecting and reporting the CJIT data set via the National Drug Treatment Monitoring System (NDTMS). DIP continues to be implemented in Wirral, with the processes that underpinned it originally remaining in place at all stages of the criminal justice system, in order to engage offenders who use drugs and/or alcohol in treatment.

The CJIT data set captures client information, episode details (including drug and alcohol use, and offending behaviour), referrals to structured treatment and recovery support sub-interventions. Assessments allow CJIT workers to determine whether further intervention is required to address drug and/or alcohol use and offending, and if necessary, encourage engagement with a range of appropriate treatment options. This is a key element of DIP, as it provides wraparound support across four key areas: drug and alcohol use (harm reduction and overdose management); offending; health (physical and psychosocial); and, social functioning (housing, employment and relationships) (Home Office [n.d.]).

This DIP Activity report for Wirral presents data for clients accessing DIP between 1 April 2019 and 31 March 2020, contextualising CJIT data^{1,2,3,4}. It complements the monthly DIP Performance Reports by providing an annual snapshot of the CJIT data set, including episode details and client demographics. Where possible, comparisons to the Merseyside figures and the previous three years' Wirral CJIT activity have been made. This report also provides recommendations for Wirral Local Authority and Wirral's drug and alcohol treatment provider, in terms of targeting the efficient use of resources and effective services in Wirral and across Merseyside.

¹ Please note that this report focuses on Wirral residents from *Figure 5* onwards. Also note that figures for gender, age and ethnicity are for individuals (*Figures 5-8*); however, this is not the case for other figures, as data may change for clients with more than one CJIT episode during the reporting year.

² Throughout this report numbers less than five have been suppressed to maintain client confidentiality. Where there is only one number less than five in a category then two numbers have been suppressed to prevent back calculations from totals (e.g. <10).

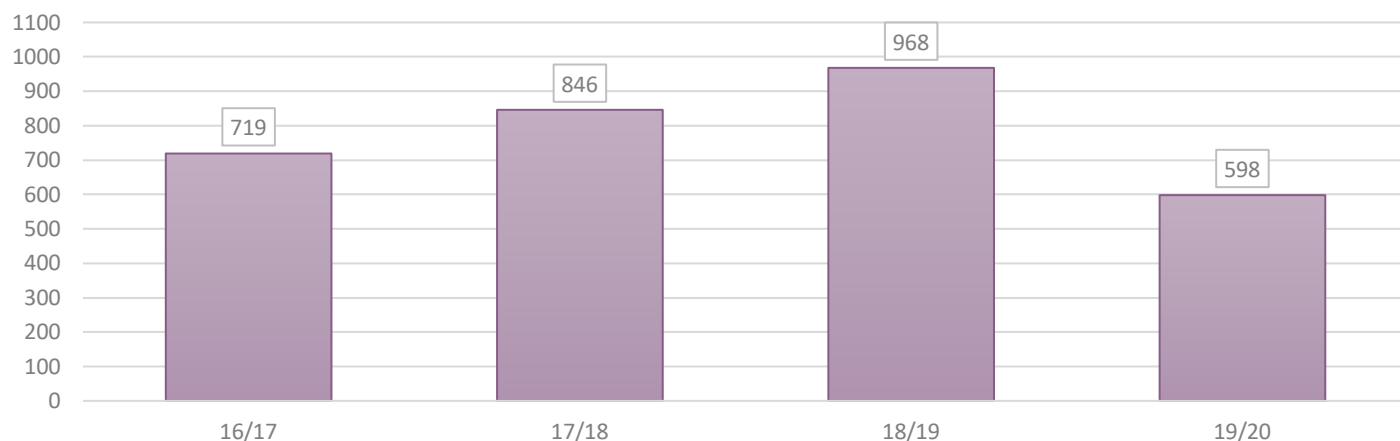
³ Note that in instances where there are blank records, or the client declines to answer, does not know or does not state a response, these have been excluded from the calculations; therefore, totals may not add up to the total number of CJIT contacts or individuals.

⁴ Note that percentages may not add up to 100% due to rounding.

OVERVIEW

Between April 2019 and March 2020, there were 598 Criminal Justice Intervention Team (CJIT) contacts recorded by the drug and alcohol treatment provider in Wirral (478 individuals). This is a 38% decrease on the previous year and the lowest number of CJIT contacts between 2016/17 and 2019/20 (Figure 1). This decrease, to some extent, could be attributed to the treatment provider ceasing to assess non-Wirral residents in 2019. Conversely, three of the other Merseyside CJIT areas have seen an increase in the number of CJIT contacts in 2019/20, which could be attributed to the 22% increase in the number of attempted drug tests carried out by Merseyside Police in the custody suites between 2018/19 and 2019/20 (Critchley and Whitfield, 2020).

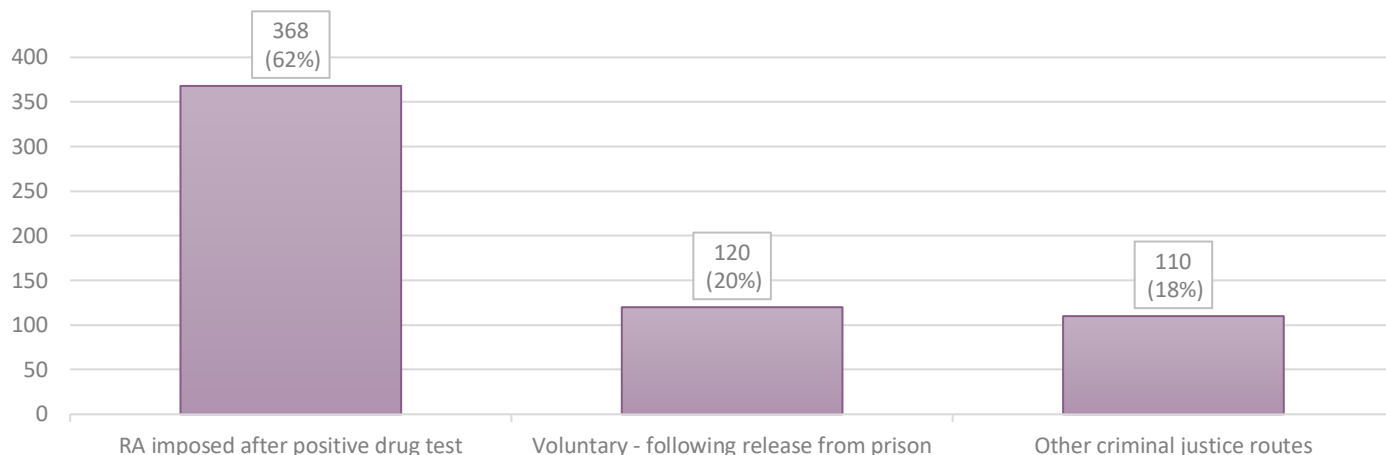
Figure 1: Trends of Wirral CJIT contacts, 2016/17 - 2019/20



CRIMINAL JUSTICE ROUTES IN WIRRAL

Figure 2 shows the criminal justice routes that led to the contact with Wirral CJIT in 2019/20. Just over three in five CJIT contacts were Required Assessments (RAs) imposed after a positive drug test for opiates and/or cocaine in a police custody suite (n=368; 62%), while 120 (20%) were voluntary presentations following release from prison and 110 (18%) were other criminal justice routes⁵. The number of RAs in 2019/20 is a 41% decrease on the previous year, which could be attributed to the drug and alcohol treatment provider no longer assessing non-Wirral residents.

Figure 2: Referral routes of Wirral CJIT contacts, 2019/20

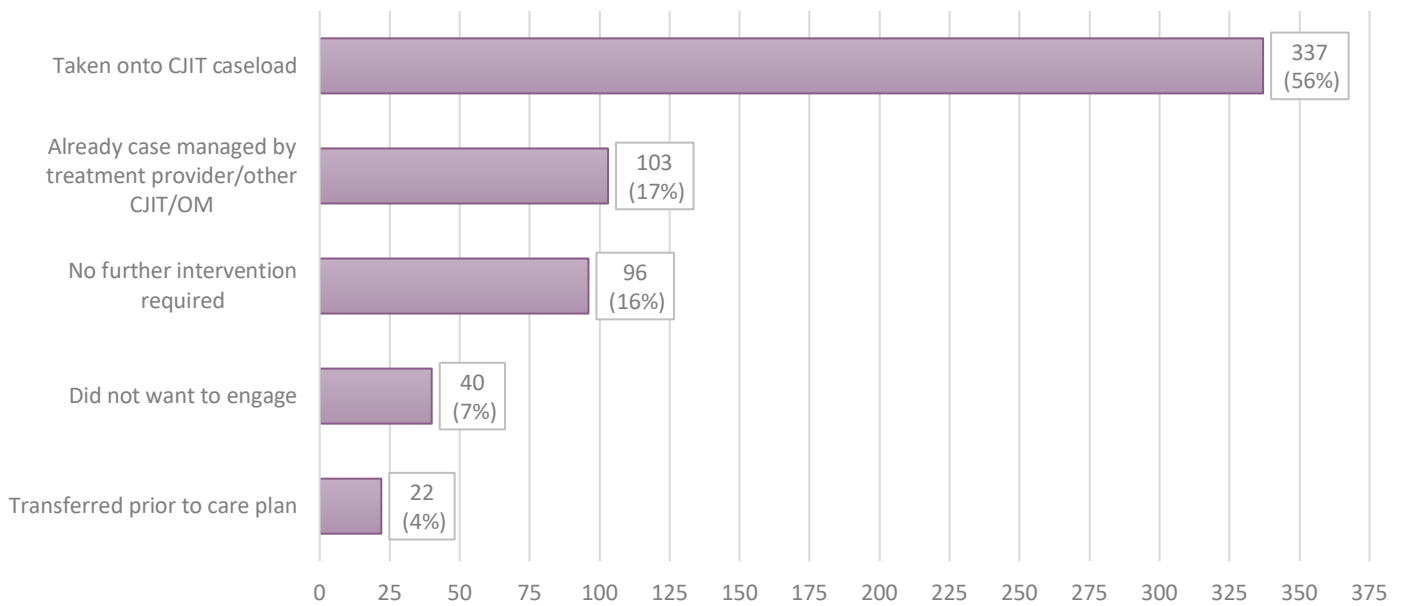


⁵ Other criminal justice routes: required by offender management scheme/DRR/ATR/IOM = 68; voluntary - following cell sweep = 21; requested by Offender Manager (post DRR/ATR) = 13; referred by treatment provider (post treatment) = 6; pre-sentence report <5; voluntary - liaison and diversion <5.

OUTCOMES FOLLOWING CRIMINAL JUSTICE ASSESSMENT

Of the 598 Wirral CJIT contacts in 2019/20, over half were taken onto the CJIT caseload (n=337; 56%), while 103 (17%) were already case managed by the treatment provider, other CJIT or Offender Manager, and 96 (16%) required no further intervention (Figure 3). The proportion of clients taken onto Wirral's CJIT caseload in 2019/20 is higher than in 2017/18 (51%) and 2018/19 (40%), and slightly higher than the Merseyside 2019/20 total (53%), while the proportion of clients already case managed is higher than the previous three years and higher than the other Merseyside CJIT areas (Merseyside total: 9%). The proportion who did not require further intervention is similar to the previous year (17%), though notably, the proportion of clients who transferred prior to care plan is considerably lower than the previous three years, which could be attributed to the treatment provider ceasing to assess non-Wirral residents in 2019.

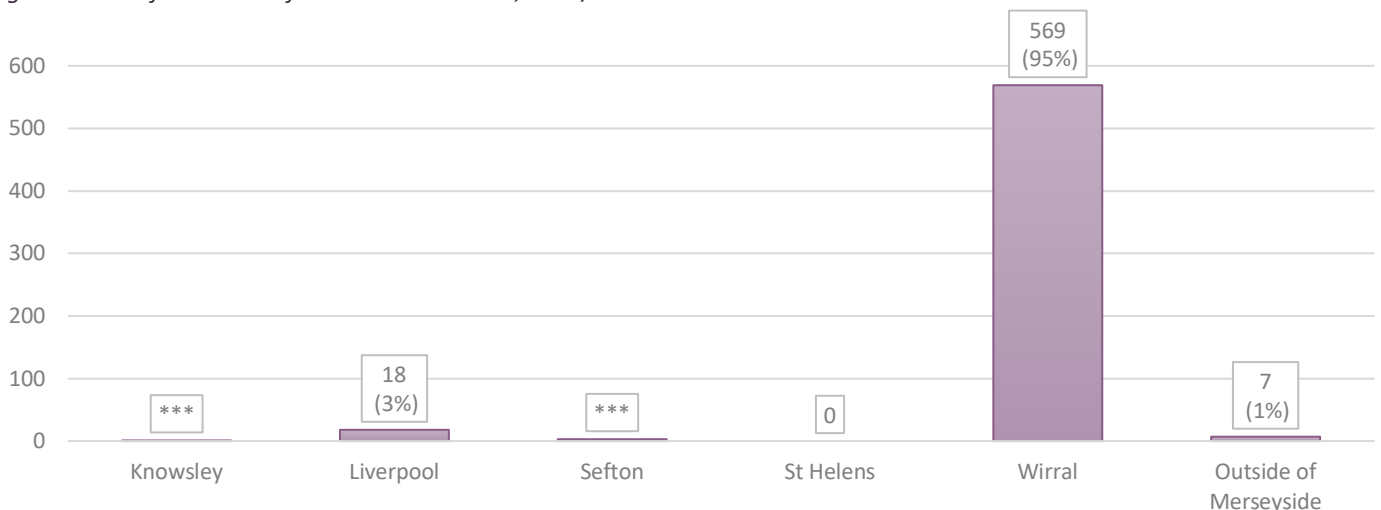
Figure 3: Outcomes following criminal justice assessment of Wirral CJIT contacts, 2019/20



CJIT OF RESIDENCE

The majority of Wirral CJIT contacts in 2019/20 were Wirral residents (n=569; 95%), which is a considerably higher proportion when compared to the previous year (72%) (Figure 4).

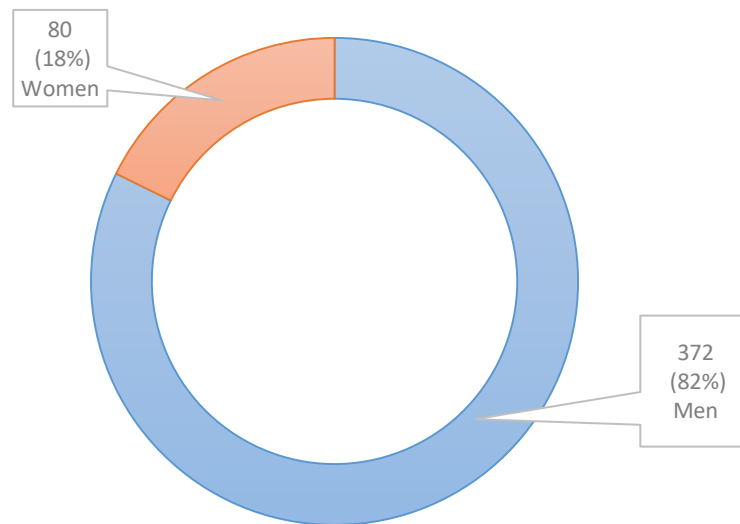
Figure 4: CJIT of residence of Wirral CJIT contacts, 2019/20



DEMOGRAPHICS

Of the 569 CJIT contacts who were Wirral residents, there were 452 individuals. Just over four in five individuals in contact with Wirral CJIT in 2019/20 were men (n=372; 82%) (Figure 5). Wirral has the highest proportion of women across the five Merseyside areas (Merseyside total: 16%) and is higher than the previous three years.

Figure 5: Gender of Wirral CJIT contacts (individuals), 2019/20



The average age of the CJIT contacts in 2019/20 was 36 years, which is the same as the previous year. Looking at age groups, just under one in five individuals were aged 25-29 years (n=81; 18%), followed by clients aged 30-34 years (n=79; 17%) (Figure 6). These proportions are similar to the previous year and notably, the proportion of 25-29 year olds is slightly higher than the Merseyside figure (15%).

Figure 6: Age group of Wirral CJIT contacts (individuals), 2019/20

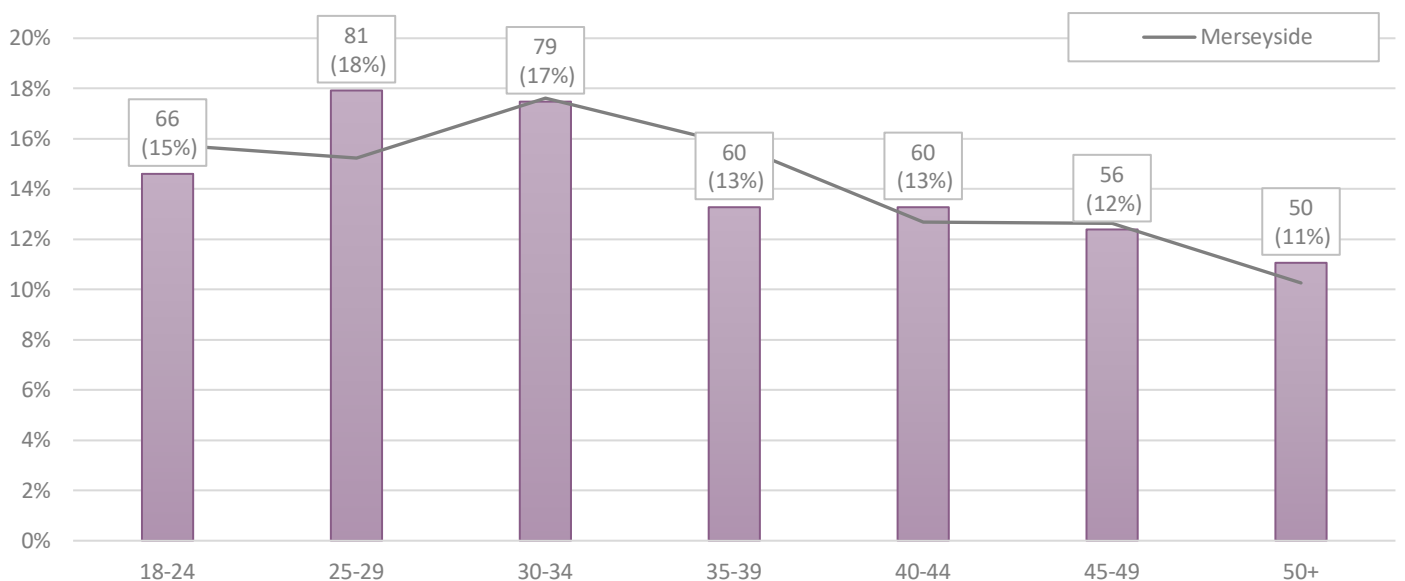
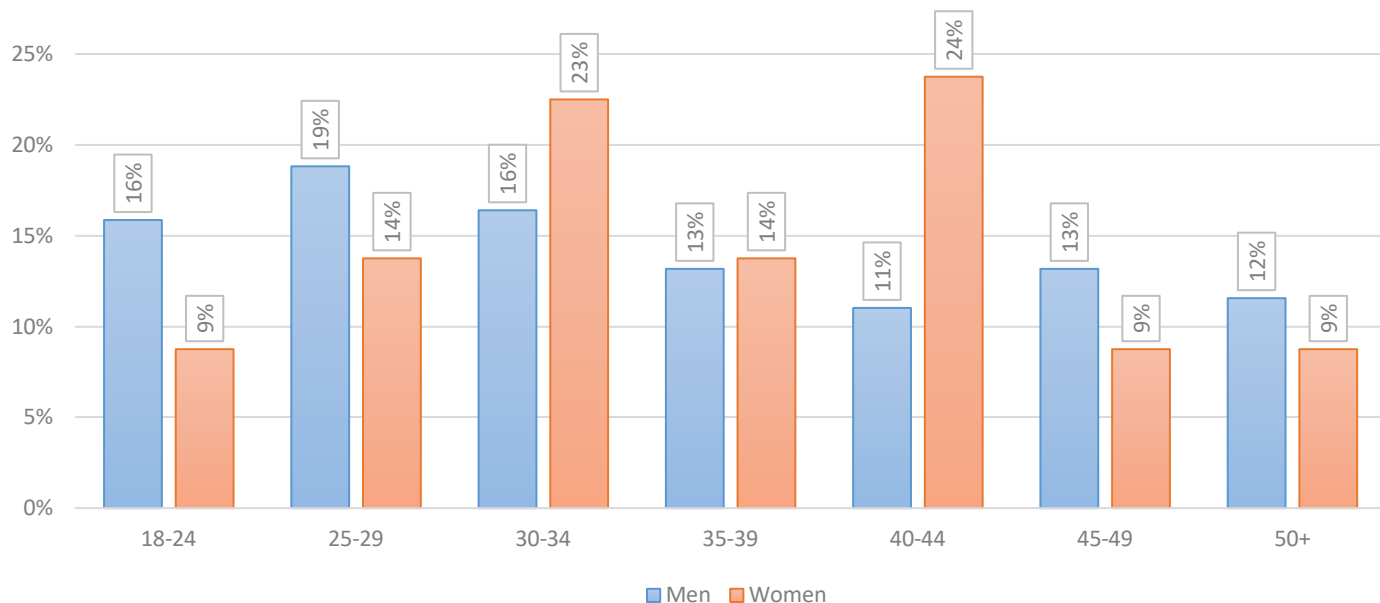


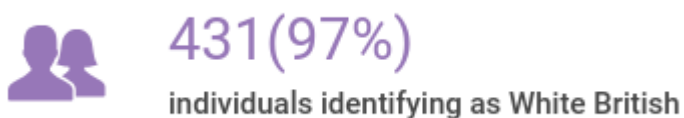
Figure 7 shows some differences in age group proportions across gender groups in Wirral. Whilst there are fewer female CJIT contacts, there were larger proportions aged 30-34 years and 40-44 years (23% and 24% respectively) when compared to men (16% and 11% respectively).

Figure 7: Age group and gender of Wirral CJIT contacts (individuals), 2019/20



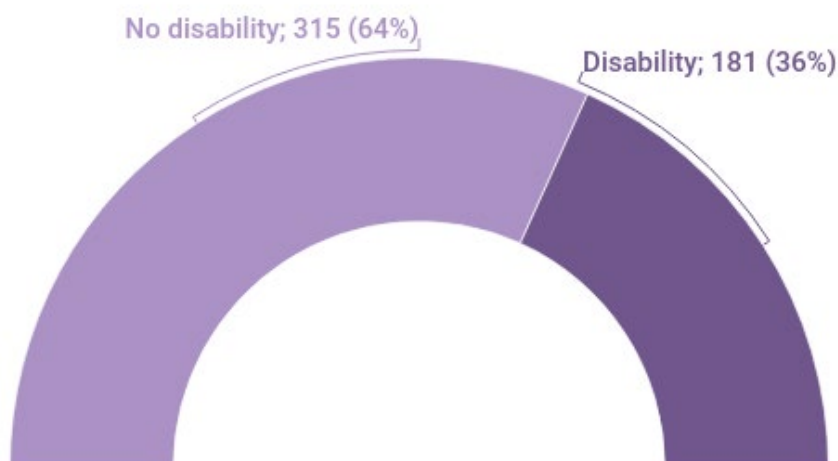
Almost all of the Wirral CJIT contacts identified themselves as White British (n=431; 97%) (Figure 8), which is higher than the Merseyside proportion (95%).

Figure 8: Ethnicity of Wirral CJIT contacts (individuals), 2019/20



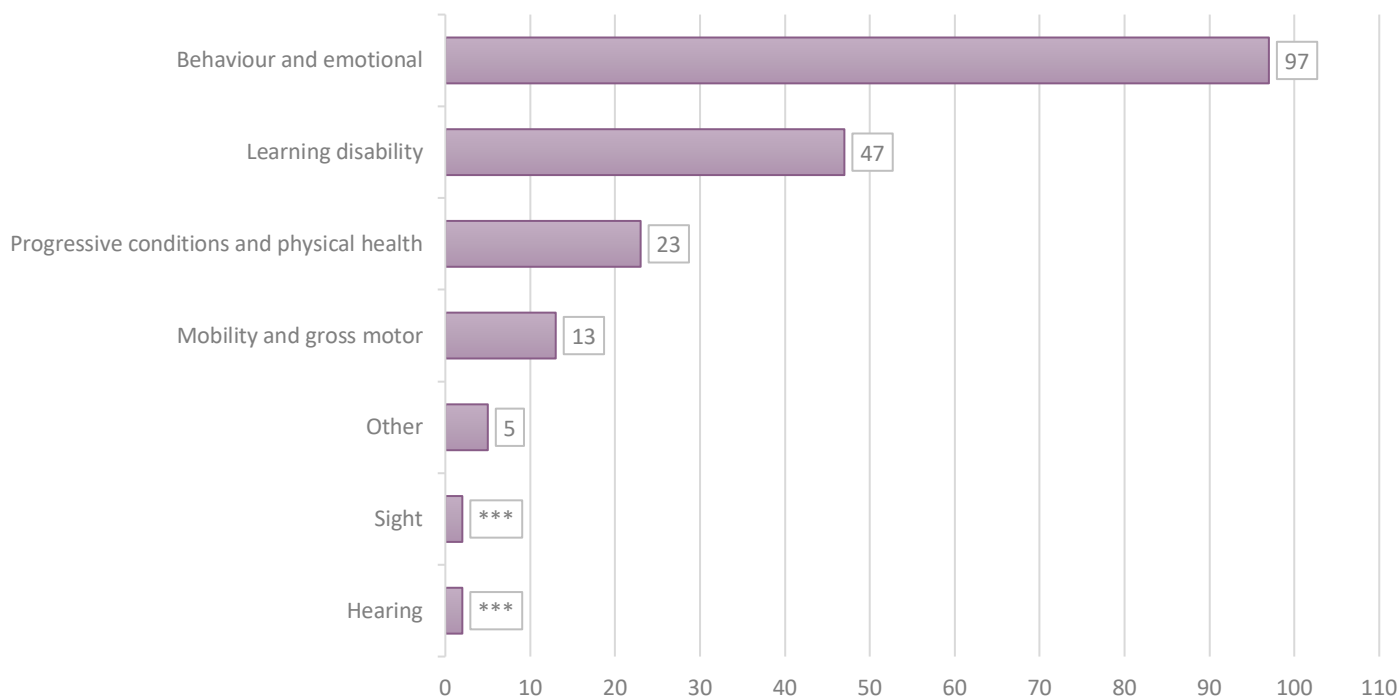
Over one-third of the Wirral residents considered themselves to have a disability (n=181; 36%) (Figure 9), which is somewhat higher than the Merseyside proportion (25%).

Figure 9: Wirral CJIT contacts with a disability, 2019/20



The 181 clients who considered themselves to have a disability reported a total of 189 disabilities⁶. Around half of the disabilities were behaviour and emotional (n=97; 51%), followed by learning disability (n=47; 25%), and progressive conditions and physical health (n=23; 12%) (Figure 10).

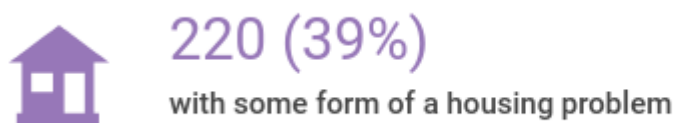
Figure 10: Disability type of Wirral CJIT contacts, 2019/20



HOUSING NEED

Around two in five of the Wirral CJIT contacts had some form of a housing problem (n=220; 39%) (Figure 11), with 92 (16%) stating an urgent housing need due to being of no fixed abode. The proportion of Wirral residents who stated some form of a housing problem is substantially higher than the other Merseyside CJITs (Merseyside total: 25%) and higher than the previous three years.

Figure 11: Wirral CJIT contacts with a housing problem, 2019/20



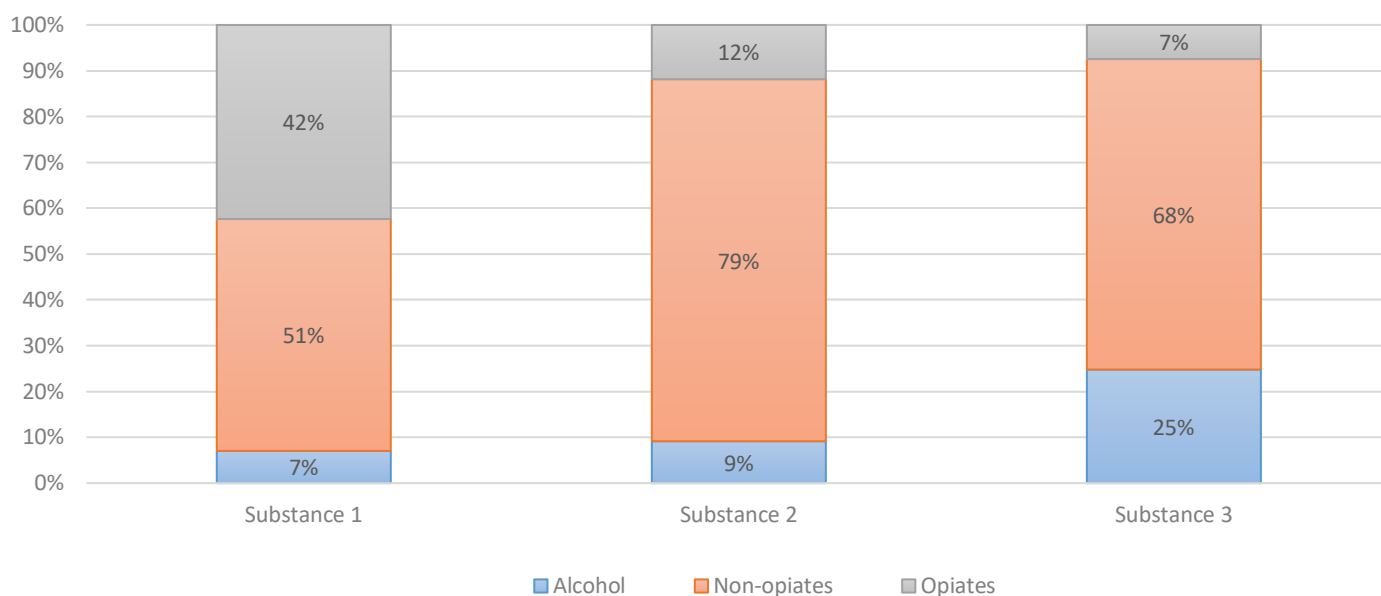
⁶ Please note that clients may have up to three disabilities recorded.

SUBSTANCE USE

In 2019/20, around half of the Wirral CJIT contacts reported non-opiate drugs as their main substance (n=288; 51%), followed by opiate drugs (n=241; 42%) and alcohol (n=40; 7%) (Figure 12). The proportion of non-opiates recorded as the main substance is the same as the Merseyside figure and has increased year-on-year (from 37% in 2016/17), while the proportion of opiates is slightly higher than the Merseyside figure (39%), though is lower than the previous three years' proportions for Wirral CJIT clients. Furthermore, the proportion of alcohol recorded as the main substance decreased year-on-year, from 18% in 2016/17.

The main substance had the highest proportion of opiate drugs (n=241; 42%), while non-opiate drugs were highest for the second substance (n=354; 79%) (Figure 12).

Figure 12: Substance type of Wirral CJIT contacts, 2019/20



When the main, second and third substances are combined (n=1,138), one-quarter reported use of crack (n=289; 25%) and one-quarter reported heroin (n=281; 25%), followed by around one in five who reported cocaine (n=219; 19%). The proportion of Wirral CJIT contacts who reported crack is similar to the previous year (24%) and the highest of the five Merseyside areas (Merseyside total: 22%), while heroin is the same as the previous year and is slightly higher than the Merseyside figure (23%). The proportion of cocaine is also similar to the previous year (17%), though it is the lowest proportion recorded by the five Merseyside CJITs (Merseyside total: 24%).

Figure 13 shows figures split by substance one, two and three. Two in five Wirral CJIT contacts reported use of heroin as their main substance (n=227; 40%), followed by cocaine (n=194; 34%). The proportion of heroin recorded as the main substance is lower than the previous three years, though it is slightly higher than the Merseyside figure (38%), while the proportion of cocaine has increased year-on-year (from 16% in 2016/17), though it is the lowest proportion of cocaine recorded across Merseyside (Merseyside total: 39%). Furthermore, Wirral reported the highest proportion of crack recorded as the main substance across Merseyside (Merseyside total: 7%). Just under half of the Wirral CJIT contacts in 2019/20 reported crack as their second substance (n=212; 47%), while around two in five reported drugs categorised as 'other' as their third substance (n=50; 41%) (Figure 13).

Figure 13: Substances used by Wirral CJIT contacts, 2019/20

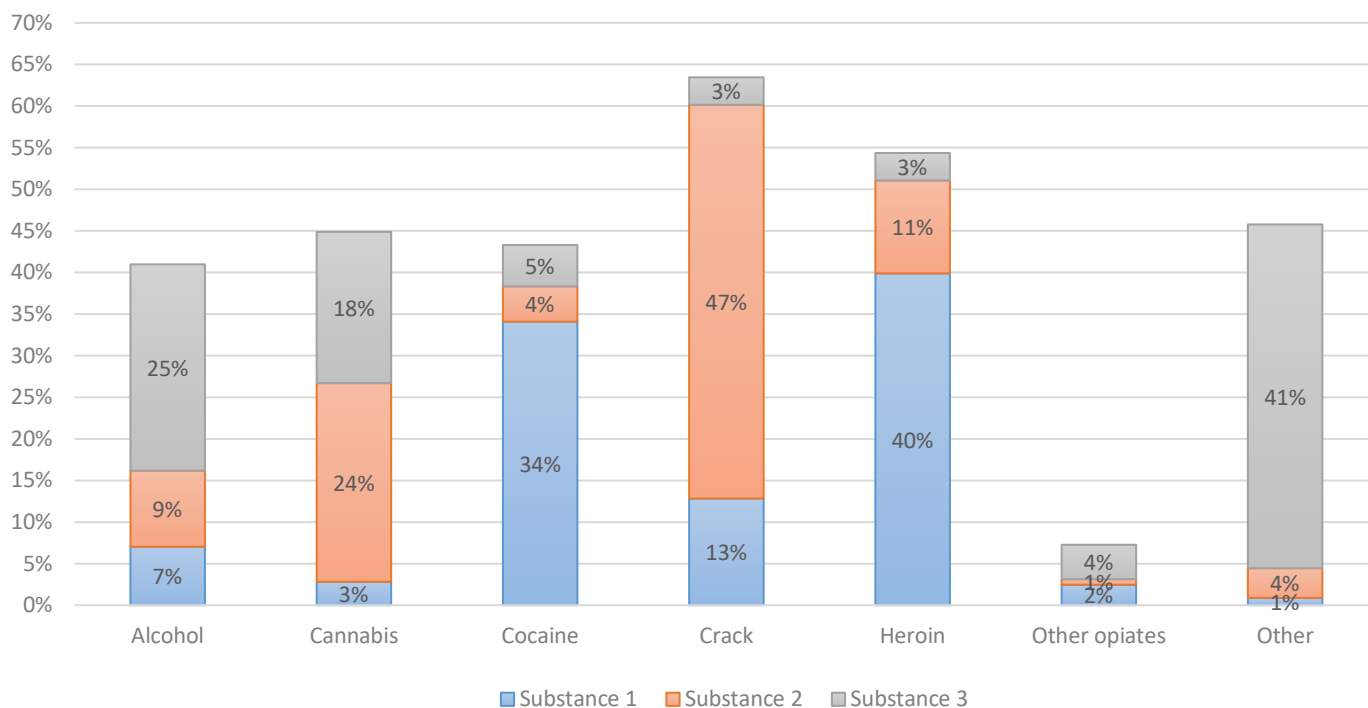


Figure 14 shows the proportions of the main substance by gender. There was a substantially larger proportion of cocaine recorded as the main substance by men (37%) when compared to women (21%), while there were larger proportions of women who reported crack or heroin (22% and 46% respectively) when compared to men (11% and 39% respectively).

Figure 14: Main substance and gender of Wirral CJIT contacts, 2019/20

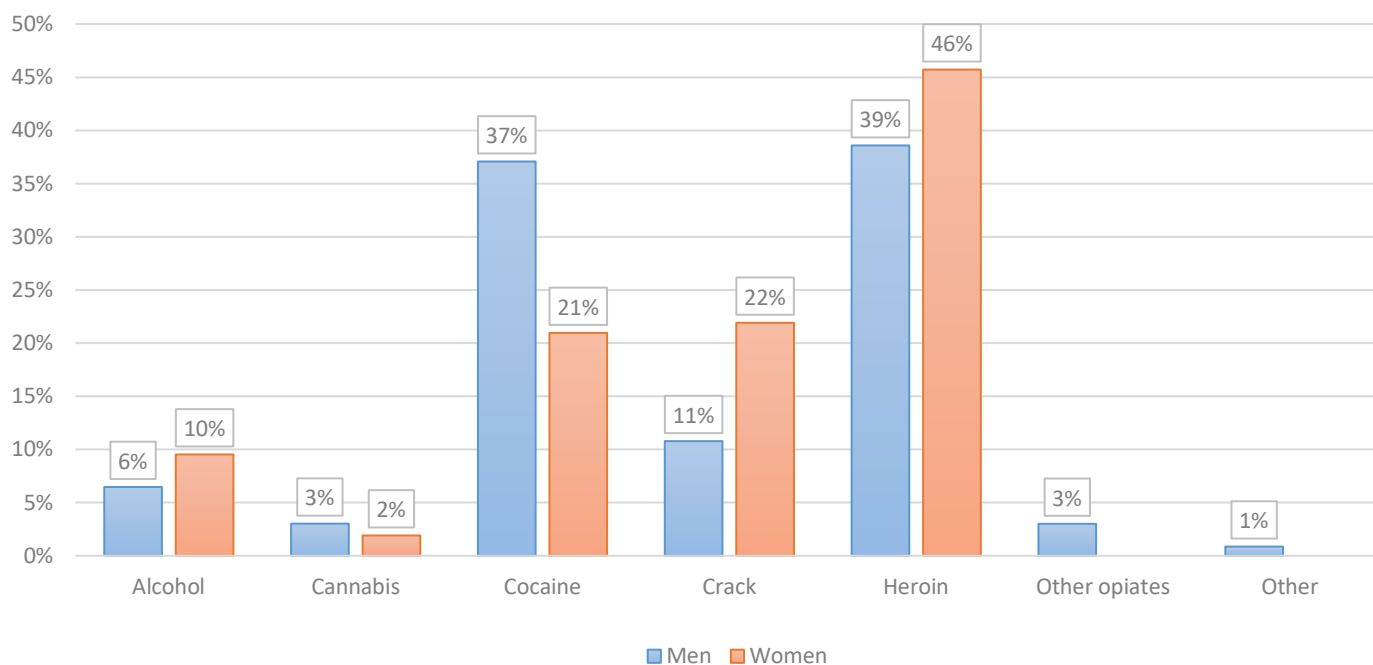
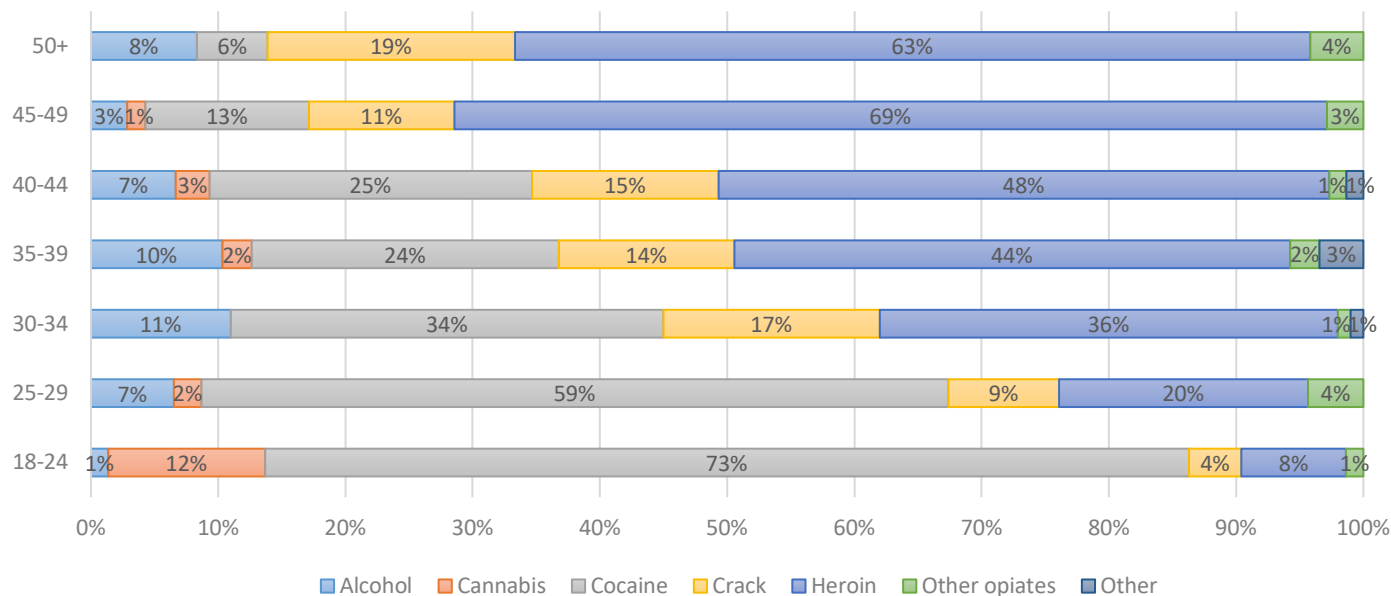


Figure 15 shows the proportions of the main substance for each age group. In general, there were larger proportions of cocaine recorded as the main substance in the younger age groups and larger proportions of heroin across the older age groups. Just under three-quarters of 18-24 year olds (73%) and around three in five 25-29 year olds (59%) reported cocaine as their main substance. Meanwhile, around seven in ten 45-49 year olds (69%) and over three in five clients aged 50 years and over (63%) reported heroin as their main substance. Furthermore, the proportions of crack fluctuated across age groups; however, were highest in clients aged 50 years and over, and 30-34 years (19% and 17% respectively).

Figure 15: Main substance and age group of Wirral CJIT contacts, 2019/20



The route of administration of Wirral CJIT clients' main substance is shown in Figure 16. Around half smoked their main substance (n=281; 49%), followed by one-third whose route of administration was intranasal (n=190; 33%). The proportion who smoked their main substance has decreased year-on-year (from 59% in 2016/17), though it is the highest proportion of the five Merseyside areas (Merseyside total: 42%). Conversely, the proportion whose route of administration of their main substance was intranasal has increased year-on-year (from 16% in 2016/17), though it is the lowest proportion of the five Merseyside areas (Merseyside total: 39%).

Figure 16: Route of administration of the main substance used by Wirral CJIT contacts, 2019/20

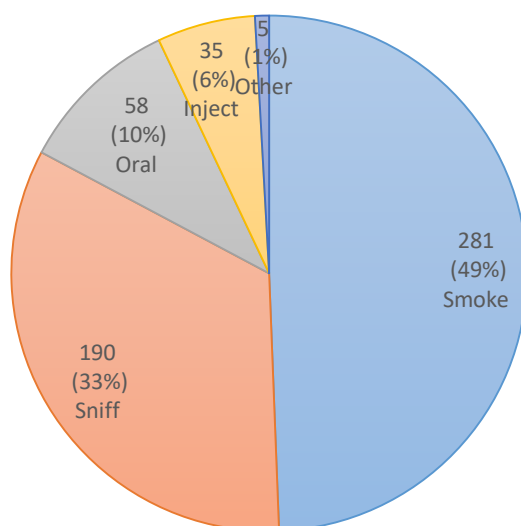
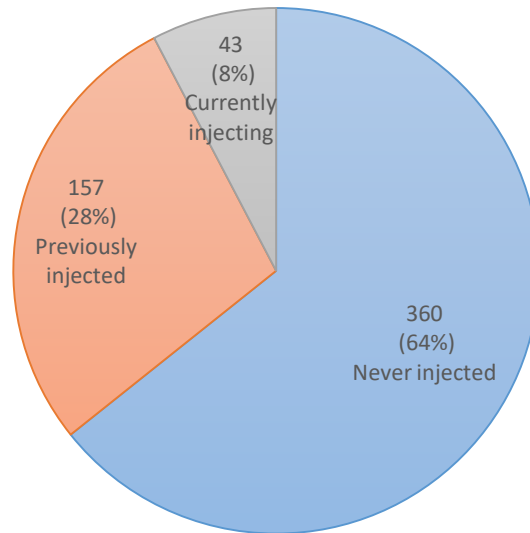


Figure 17 shows that just under two-thirds of Wirral CJIT contacts in 2019/20 stated that they had never injected (n=360; 64%), while 157 (28%) had previously injected but were not currently and 43 (8%) were currently injecting. The proportion who previously injected is higher than the previous three years and the highest proportion of the five Merseyside CJITs (Merseyside total: 21%), while the proportion currently injecting is the same as the previous year and similar to the Merseyside figure (7%).

Figure 17: Injecting status of Wirral CJIT contacts, 2019/20

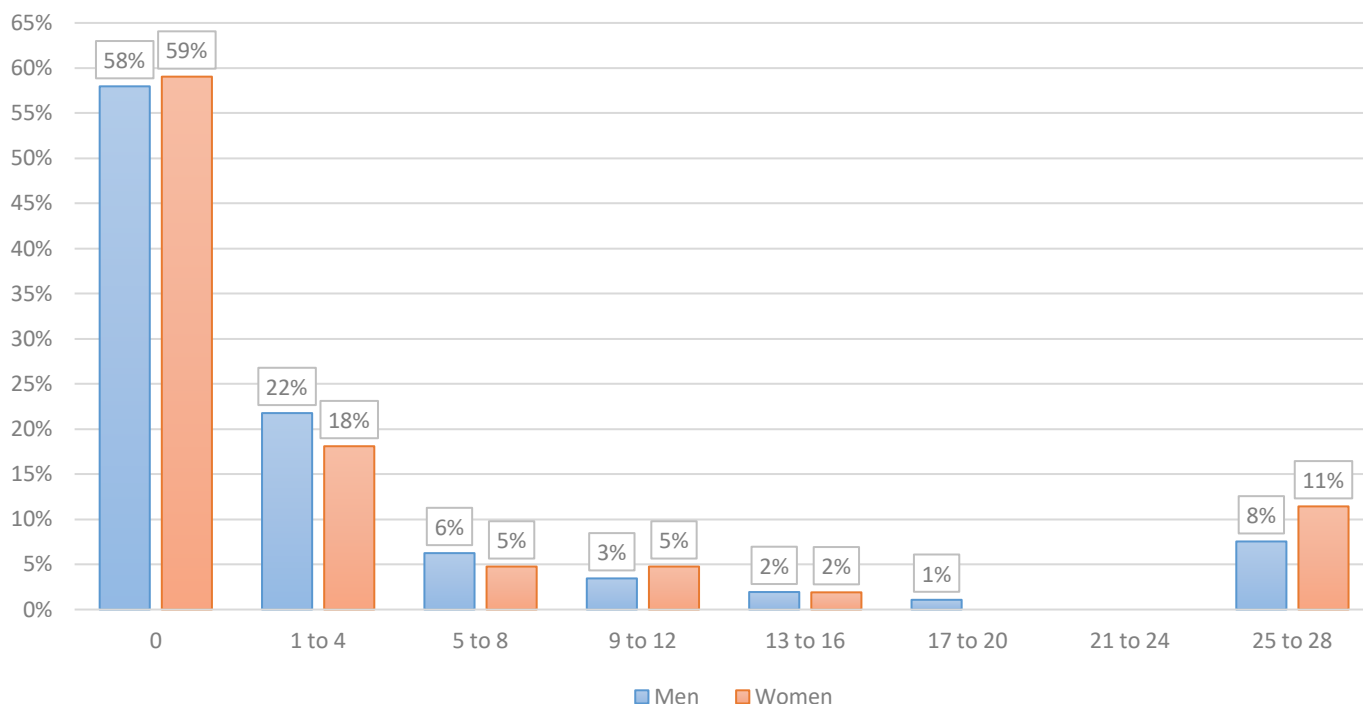


ALCOHOL CONSUMPTION

Figure 18 shows the number of days alcohol was consumed by Wirral clients in the 28 days prior to their CJIT contact. Just under three in five men did not consume alcohol in the 28 days prior to their assessment (n=269; 58%), while just over one in five reported drinking alcohol 1-4 days (n=101; 22%). Overall, 195 (42%) men reported to consume alcohol in the 28 days prior to their assessment, which is a slight decrease on the previous year's proportion (44%) and is lower than the Merseyside figure (49%).

For women, around three in five did not consume alcohol in the 28 days prior to their CJIT contact (n=62; 59%), while 19 (18%) reported drinking alcohol 1-4 days (Figure 18). Overall, 43 (41%) women reported to consume alcohol in the 28 days prior to their assessment, which is a decrease on the previous year's proportion (47%) and is slightly lower than the Merseyside figure (43%).

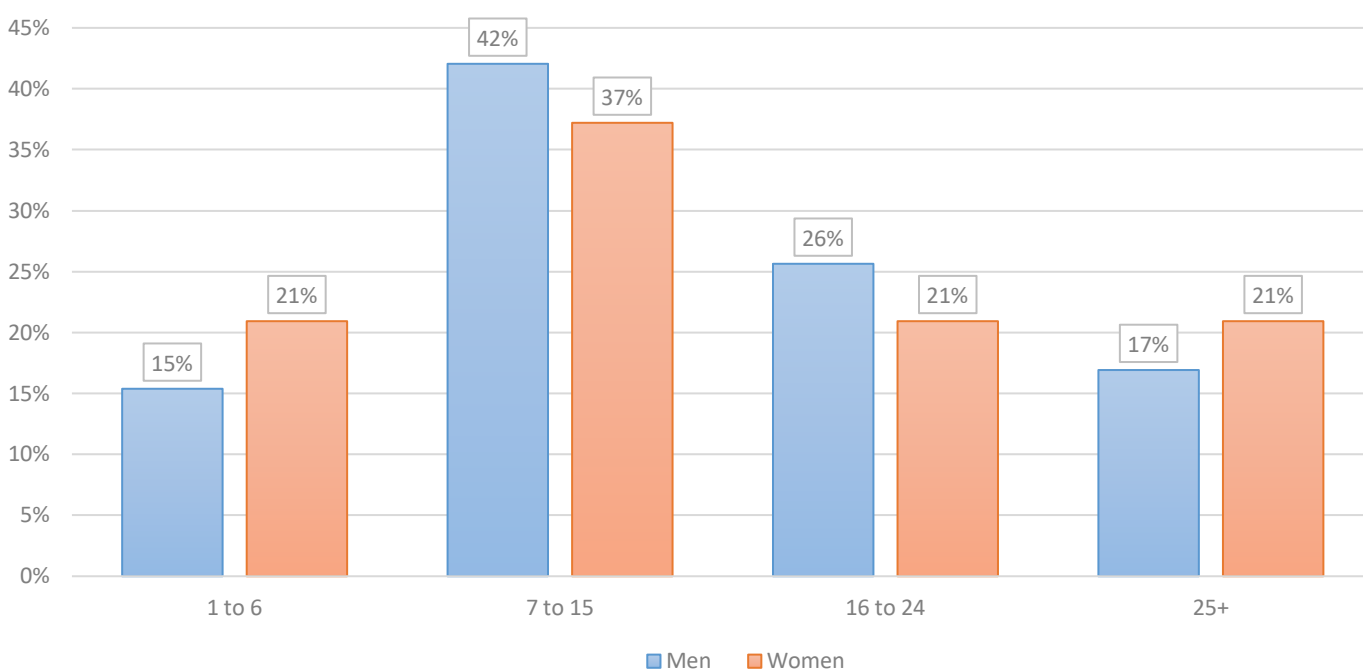
Figure 18: Number of drinking days in the 28 days prior to assessment for Wirral CJIT contacts, 2019/20



The daily average number of units of alcohol consumed by Wirral clients in the 28 days prior to CJIT contact are shown in Figure 19. Of the 195 men who did drink in the 28 days prior to their assessment, just over two in five consumed 7-15 units of alcohol daily (n=82; 42%), followed by around one-quarter who consumed 16-24 units (n=50; 26%). These proportions are similar to the Merseyside figures; however, the proportion who consumed 16-24 units and 25 units and over are lower than the previous three years.

Of the 43 women who did drink in the 28 days prior to their CJIT contact, over one-third consumed 7-15 units of alcohol daily (n=16; 37%) (Figure 19). This is the same as the previous year’s proportion and lower than the Merseyside figure (41%).

Figure 19: Number of units of alcohol (daily average) consumed by Wirral CJIT contacts, 2019/20



OFFENDING

The offence that prompted Wirral CJIT clients' current or most recent contact with the criminal justice system is shown in *Figure 20*. Three in ten were theft - shoplifting (n=163; 30%), while 129 (23%) were Misuse of Drugs Act (MDA) offences⁷. Offences categorised as 'other' accounted for 14% (n=79), while wounding or assault (n=57) and burglary (n=53) each accounted for one in ten (10%). The proportion of theft - shoplifting is a slight increase on the previous year (28%) and is substantially higher than the other Merseyside areas (Merseyside total: 18%), while the proportion of MDA offences is higher than the previous three years, though the lowest proportion of the five Merseyside CJITs (Merseyside total: 31%).

Figure 20: Offence that prompted current or most recent contact with the criminal justice system for Wirral CJIT contacts, 2019/20

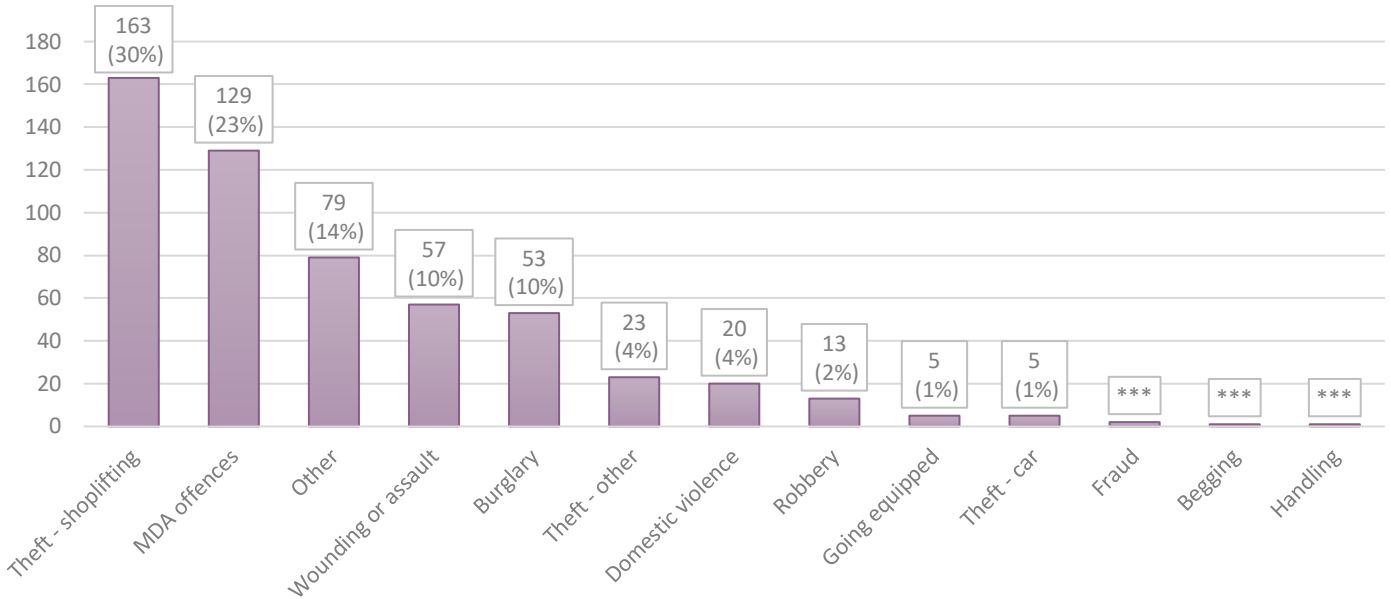
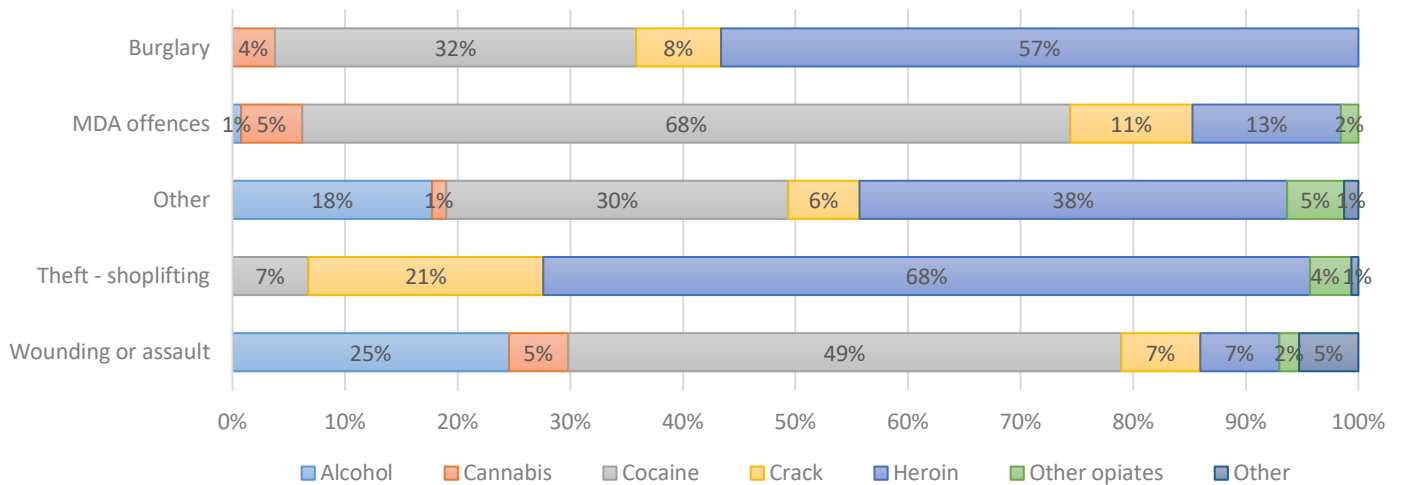


Figure 21 shows the proportions of the main substance for the most common offences. Heroin recorded as the main substance was most prominent for those whose contact with Wirral CJIT was prompted by theft - shoplifting (68%) and burglary (57%). While for cocaine, it was MDA offences (68%) and wounding or assault (49%). Furthermore, around one in five in contact with Wirral CJIT due to a theft - shoplifting offence reported crack as their main substance (21%).

Figure 21: Main substance and offence of Wirral CJIT contacts, 2019/20



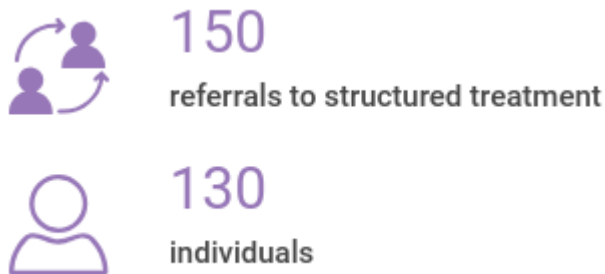
⁷ Notably, around two-thirds of the MDA offences were possession (n=85; 66%), while the remainder were supply.

INTERVENTIONS

REFERRALS TO STRUCTURED TREATMENT

Of the clients taken onto the CJIT caseload, 150 were referred to structured treatment in 2019/20 (130 individuals) (Figure 22)⁸.

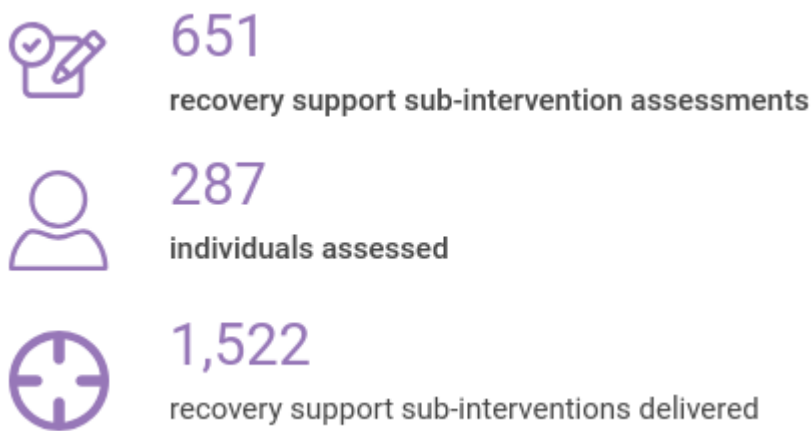
Figure 22: Referrals to structured treatment for Wirral CJIT contacts, 2019/20



RECOVERY SUPPORT SUB-INTERVENTIONS

In 2019/20, a total of 651 recovery support sub-intervention assessments were carried out on clients on the CJIT caseload (287 individuals), with a total of 1,522 sub-interventions delivered (Figure 23)⁸.

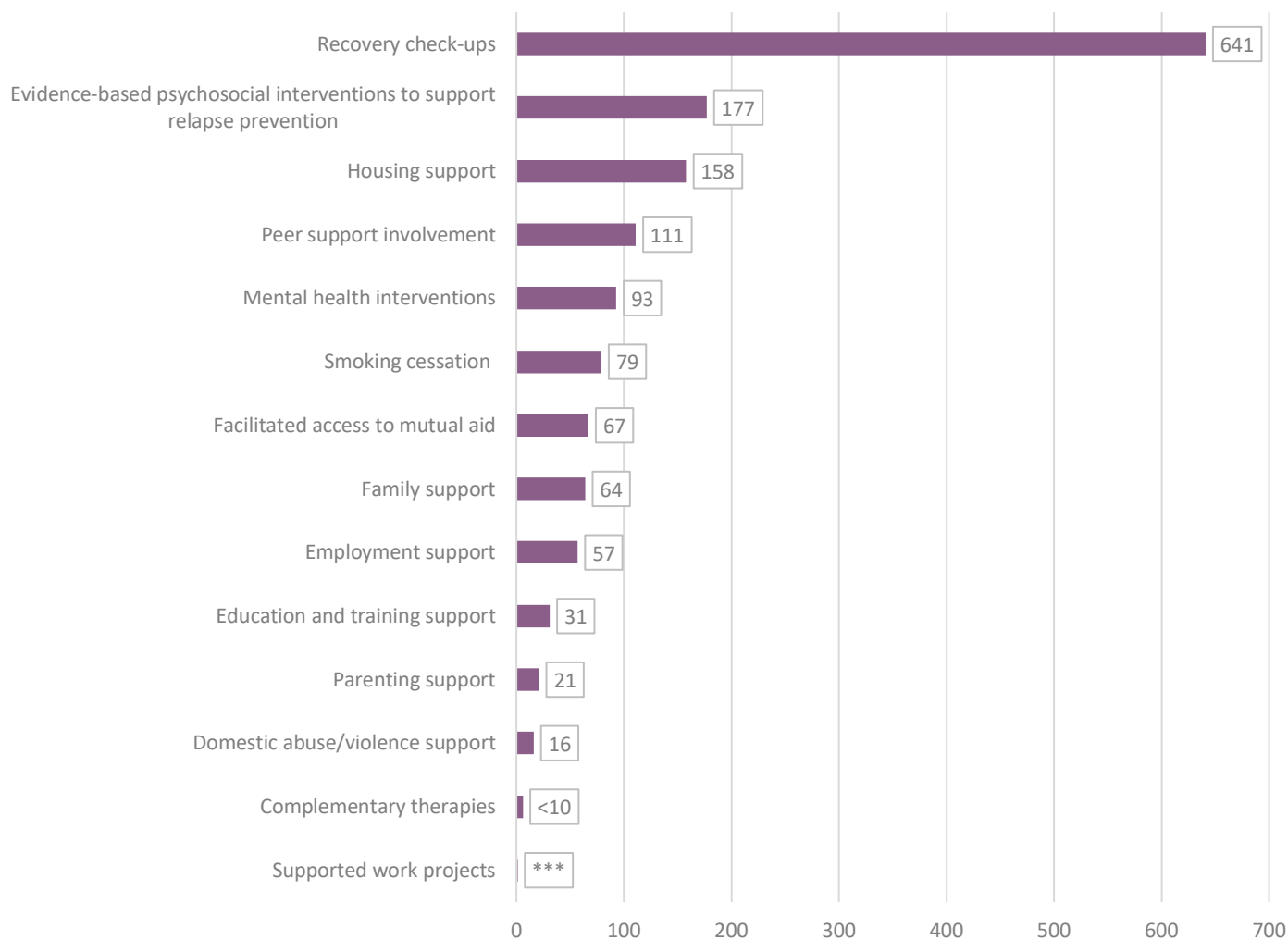
Figure 23: Recovery support sub-intervention assessments for Wirral CJIT contacts, 2019/20



⁸ Clients not taken onto the CJIT caseload, and clients with the same caseload start date and discharge date (as these are deemed to have not been taken onto the CJIT caseload), have been excluded from these figures. Figures include referrals to structured treatment or recovery support sub-intervention assessments where the date was between 1 April 2019 and 31 March 2020, regardless of when the client was taken onto the CJIT caseload.

Of the total recovery support sub-interventions delivered, just over two in five were recovery check-ups (n=641; 42%), followed by evidence-based psychosocial interventions to support relapse prevention (n=177; 12%) and housing support (n=158; 10%) (Figure 24).

Figure 24: Recovery support sub-interventions delivered to Wirral CJIT contacts, 2019/20



RECOMMENDATIONS

- In order to have a comprehensive understanding of substance use and the criminal justice system in the local area, stakeholders should use this report and other DIP reports alongside data available from other Public Health Institute monitoring systems (e.g. drug-related deaths, Integrated Monitoring System), as well as Public Health England data sets (e.g. NDTMS) and local treatment services. Such information can be used as part of the local health needs assessment, potentially contribute to the Joint Strategic Needs Assessment and be used collaboratively to help improve the lives of offenders who use drugs and/or alcohol in Wirral and Merseyside.
- All partners in the DIP process should utilise all available data, which allow us to look at trends over time. This information will enable stakeholders to stay informed, up to date and observe any changes and/or trends within Wirral and across Merseyside, as well as investigating the reasons for these trends. This could help to evidence any process changes that may be needed, in addition to highlighting potential gaps or barriers that may prevent these clients from engaging with treatment services.
- As well as identifying clients' routes into DIP, the data set enables client profiling; including gender, age, ethnicity, disability, housing need, substance use, alcohol consumption and offending. This information is key to identifying likely presenters to DIP and can influence resources and services required to cater for the needs of these individuals. In keeping with the Government's Drug Strategy (HM Government, 2017), clients need to be assessed on a person-by-person basis and such information should inform decisions relating to the most appropriate treatment for that individual. With resources and budgets constantly under scrutiny, this information should be used regularly to ensure that these individuals receive effective treatment and interventions are demonstrated to provide appropriate support with quality outcomes.
- Wirral CJIT and the commissioners should identify and monitor the differences between the local area and the other Merseyside areas. Key stakeholders should consider these differences and assess whether the approaches, treatment availability, health improvement and community safety campaigns are appropriate for Wirral, reflecting the differences in service specifications when procuring services.
- In 2018, PHE introduced data quality metrics, accessible via CJIT reporting on NDTMS. The purpose of the metrics is to assist treatment providers in improving data quality of submitted data, with each metric highlighting incomplete or anomalous data. Data quality reports should be accessed routinely and any data quality issues should be addressed.

These recommendations are unlikely to be achieved without sustained working between all stakeholders; however, their implementation would likely aid offenders who use drugs and/or alcohol in being referred to treatment services appropriately and having an effective treatment experience with sustainable outcomes.

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