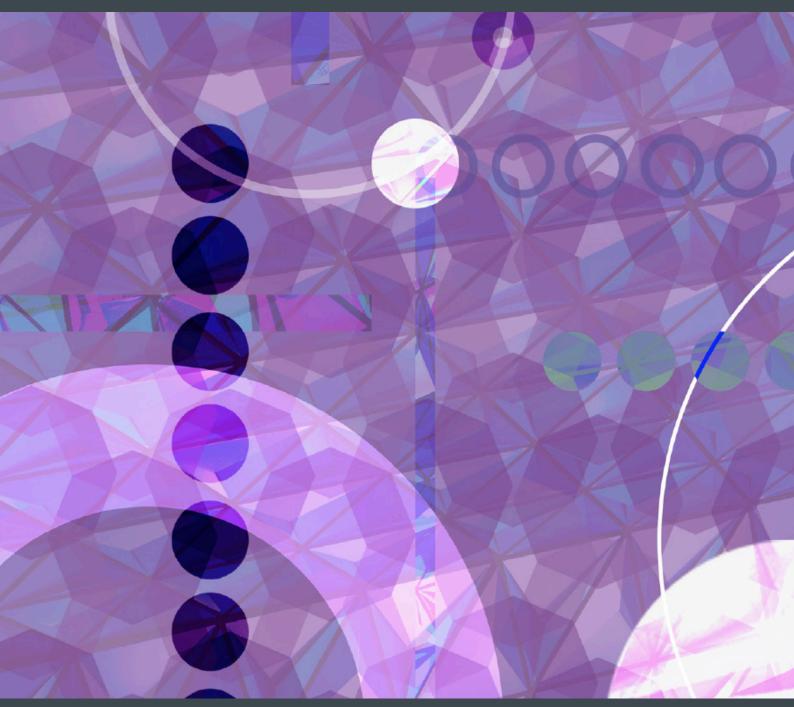
Criminal Justice Project: Drug Interventions Programme DIP Activity in Wirral (2018/19)

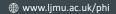
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- Between April 2018 and March 2019, there were 968 Criminal Justice Intervention Team (CJIT) contacts recorded by the drug and alcohol treatment provider in Wirral. This is a 35% increase since 2016/17.
- Just under two-thirds of CJIT contacts in 2018/19 were through Required Assessments (n=625; 65%), while 238 (25%) were other criminal justice routes and 105 (11%) were voluntary presentations following release from prison.
- Of the 968 CJIT contacts in 2018/19, two in five were taken onto the CJIT caseload (n=389; 40%), while just over one in five transferred to another CJIT or prison prior to care plan (n=215; 22%).
- Over seven in ten Wirral CJIT contacts in 2018/19 were Wirral residents (n=698; 72%), while 153 (16%) were Liverpool residents.
- Over four in five individuals were men (n=449; 84%).
- The largest proportion of clients were aged 18-24 years (n=90; 17%), while 84 (16%) were aged 25-29 years and 86 (16%) were aged 30-34 years.
- The majority were of White British ethnicity (n=505; 96%).
- Around a third of Wirral CJIT contacts considered themselves to have a disability (n=206; 34%).
- While the majority of clients reported no housing problems, 247 (35%) had some form of a housing problem, with 85 (12%) stating an urgent housing need due to being of no fixed abode.
- In 2018/19, Wirral CJIT reported equal numbers for opiate drugs and non-opiate drugs as the main substance (n=308; 44%), while alcohol accounted for 12% (n=82).
- Over two in five CJIT contacts reported heroin (n=296; 42%) and over one-quarter reported cocaine (n=191; 27%) as their main substance. Half reported crack as their second substance (n=263; 50%), while around three in ten reported alcohol as their third substance (n=50; 31%).
- Around half smoked their main substance (n=354; 51%), followed by just over one-quarter who sniffed their main substance (n=187; 27%).
- Seven in ten stated that they had never injected (n=485; 70%), while 153 (22%) had previously injected but were not currently and 57 (8%) were currently injecting.
- Over two in five men reported consuming alcohol in the 28 days prior to their CJIT assessment (n=258; 44%). One-third consumed 7-15 units of alcohol daily (n=83; 33%), while 74 (29%) consumed 16-24 units and 59 (23%) consumed 25 units or more.
- Under half of the women reported consuming alcohol in the 28 days prior to their CJIT assessment (n=51; 47%). Of these, under two in five consumed 7-15 units of alcohol daily (n=19; 37%), followed by 14 (27%) who consumed 25 units or more daily.
- Just under three in ten reported theft shoplifting (n=184; 28%), followed by 135 (20%) Misuse of Drugs Act offences.
- There were 139 referrals to structured treatment in 2018/19 (125 individuals).
- In 2018/19, a total of 690 recovery support sub-intervention assessments were carried out on clients on the CJIT caseload (346 individuals), with a total of 1,106 sub-interventions delivered.

INTRODUCTION

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 group who engage in treatment for their substance use and offending (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 cocaine) they are required to undergo a Required Assessment (RA) with a drugs worker. There are other referral routes into DIP including Conditional Cautioning, transfers from other Criminal Justice Intervention Teams (CJITs), required by the client's Offender Manager and court mandated processes (such as Restriction on Bail, pre-sentence reports, Drug Rehabilitation Requirements and Alcohol Treatment Requirements), as well as 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. DIP assessments allow CJIT workers to determine whether further intervention is required to address drug and/or alcohol use and offending, and based on the decision the worker will then 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 1st April 2018 and 31st March 2019, contextualising CJIT data. It complements the monthly DIP Performance Reports by providing an annual snapshot of the CJIT data set. Where possible, comparisons to the Merseyside figures and the previous two years' Wirral CJIT activity have been made¹. 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, while previous annual reports provided figures for all residents in contact with Wirral CJIT. For this reason, caution should be taken when comparing this report with earlier reports; however, comparisons to the previous two years have been made for Wirral residents throughout this report. 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 year.

OVERVIEW

Between April 2018 and March 2019, there were 968 CJIT contacts (780 individuals) recorded by the drug and alcohol treatment provider in Wirral. There has been a year-on-year increase in the number of CJIT contacts, with a 35% increase since 2016/17 (*Figure 1*). Notably, all but one of the Merseyside areas have seen an increase in the number of CJIT contacts in 2018/19 when compared to the previous year, which could be attributed to the 4% increase in the number of attempted drug tests carried out by Merseyside Police in the custody suites (Critchley and Whitfield, 2019).

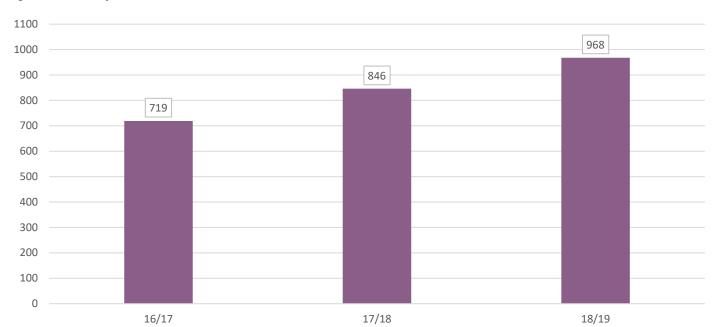


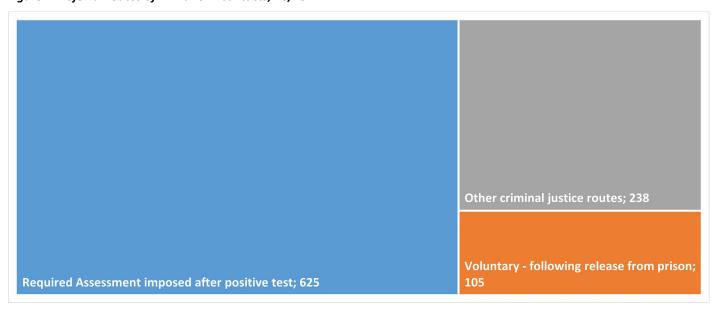
Figure 1: Trends of Wirral CJIT contacts, 16/17-18/19

CRIMINAL JUSTICE ROUTES IN WIRRAL

Figure 2 shows the criminal justice routes that led to the contact with Wirral CJIT in 2018/19. Just under two-thirds of CJIT contacts were Required Assessments imposed after a positive drug test for opiates and/or cocaine in the custody suite (n=625; 65%), while 238 (25%) were other criminal justice routes² and 105 (11%) were voluntary presentations following release from prison. The proportion of Required Assessments is similar to the Merseyside figure (63%) and has increased from 49% in 2016/17. Furthermore, the proportion of voluntary presentations following release from prison is lower than the Merseyside figure (18%), while the proportion of other criminal justice routes is higher than the Merseyside figure (20%).

² Other criminal justice routes: Required by offender management scheme/DRR/ATR/IOM = 131; voluntary - following cell sweep = 55; presentence report = 38; requested by Offender Manager (post DRR/ATR) = 5; Conditional Cautioning <5; Restriction on Bail <5; voluntary - other <5; other <5.

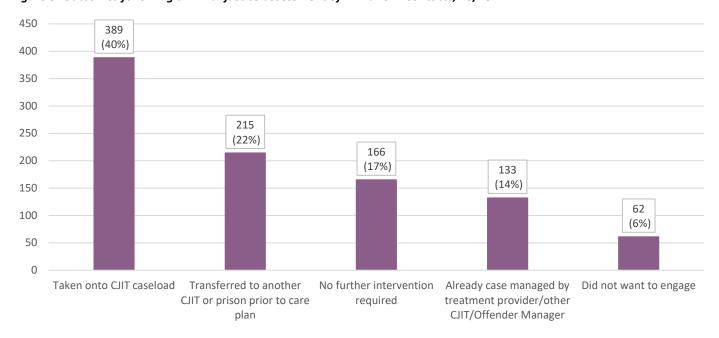
Figure 2: Referral routes of Wirral CJIT contacts, 18/19



OUTCOMES FOLLOWING CRIMINAL JUSTICE ASSESSMENT

Of the 968 Wirral CJIT contacts in 2018/19, two in five were taken onto the CJIT caseload (n=389; 40%), while just over one in five transferred to another CJIT or prison prior to care plan (n=215; 22%; *Figure 3*). There were 166 (17%) clients who did not require further intervention, 133 (14%) clients already case managed and 62 (6%) clients who did not want to engage with the CJIT. Notably, the proportion of clients taken onto the CJIT caseload is the lowest of the five Merseyside areas (Merseyside total: 48%) and decreased from 66% in 2016/17, while the proportion of clients already case managed is the highest of the five Merseyside areas (Merseyside total: 8%) and has increased from 4% in 2016/17. The proportion of clients transferred to another CJIT or prison prior to care plan is slightly higher than the Merseyside figure (17%), while proportions for clients who did not want to engage and did not require further interventions are similar to the Merseyside figures (9% and 19% respectively).

Figure 3: Outcomes following criminal justice assessment of Wirral CJIT contacts, 18/19³



³ There were <5 records that did not have a disposal reason recorded for clients not taken onto the caseload have been excluded from the calculations. Please note that throughout this report percentages may not add up to 100% due to rounding.

CJIT OF RESIDENCE

Over seven in ten Wirral CJIT contacts in 2018/19 were Wirral residents (n=698; 72%), while 153 (16%) were Liverpool residents (Figure 4).

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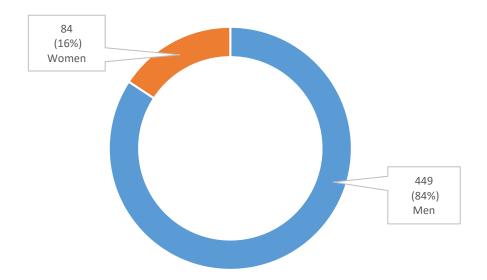
Figure 4: CJIT of residence of Wirral CJIT contacts, 18/19

WIRRAL RESIDENTS

DEMOGRAPHICS

Of the 698 CJIT contacts who were Wirral residents, there were 533 individuals. Over four in five individuals in contact with Wirral CJIT in 2018/19 were men (n=449; 84%; *Figure 5*). This is the same proportion as the Merseyside total and similar to the previous two years (83% in both years).

Figure 5: Gender of Wirral CJIT contacts (individuals), 18/19



The average age of the CJIT contacts in 2018/19 was 36 years. Looking at age groups, the largest proportion of clients were aged 18-24 years (n=90; 17%), while 84 (16%) were aged 25-29 years and 86 (16%) were aged 30-34 years. The proportions are the same or similar as the Merseyside figures for all age group and similar to the previous year. Notably, there has been a slight increase year-on-year in the proportion of 18-24 year olds, from 14% in 2016/17.

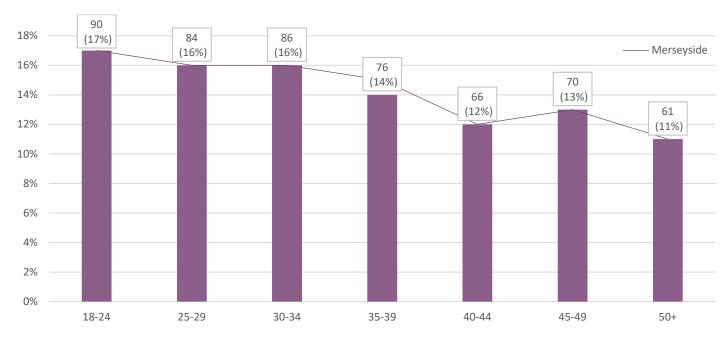


Figure 6: Age group of Wirral CJIT contacts (individuals), 18/19

Figure 7 shows some differences in age group proportions across gender groups in Wirral. Whilst there are fewer female CJIT contacts, there was a substantially larger proportion aged 40-44 years (23%) when compared to men (10%).

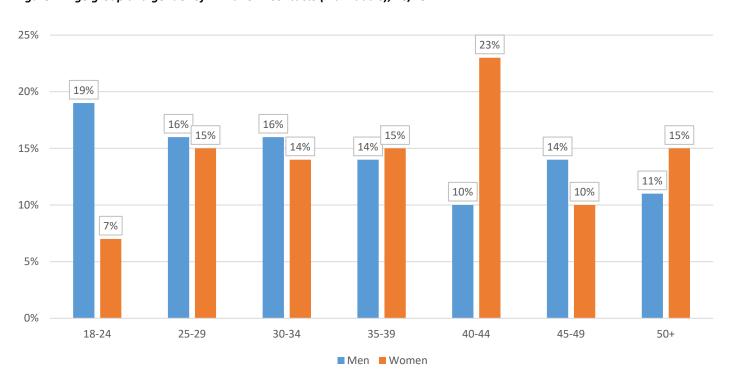


Figure 7: Age group and gender of Wirral CJIT contacts (individuals), 18/19

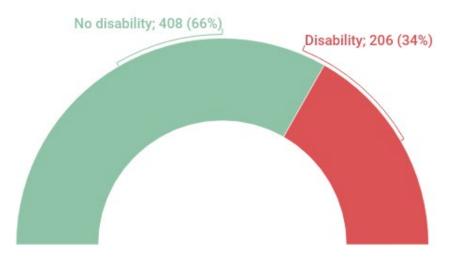
Of the Wirral CJIT contacts who have an ethnicity recorded⁴, the majority identified themselves as White British (n=505; 96%; *Figure 8*), which is similar to the Merseyside proportion (95%).

Figure 8: Ethnicity of Wirral CJIT contacts (individuals), 18/19



Where recorded, around a third of Wirral residents considered themselves to have a disability (n=206; 34%; *Figure 9*)⁵, which is somewhat higher than the Merseyside figure (22%).

Figure 9: Disability of Wirral CJIT contacts, 18/19



The 206 clients who considered themselves to have a disability reported a total of 208 disabilities. Over two in five disabilities were behaviour and emotional (n=87; 42%), followed by one-quarter who reported a learning disability (n=52; 25%; *Figure 10*) 6 . Progressive conditions and physical heath accounted for 18% (n=37) and mobility and gross motor accounted for 10% (n=20).

Figure 10: Disability type of Wirral CJIT contacts, 18/19



⁴ There were nine records where the client's ethnicity was either not stated, unknown or not recorded, and have been excluded from the calculations.

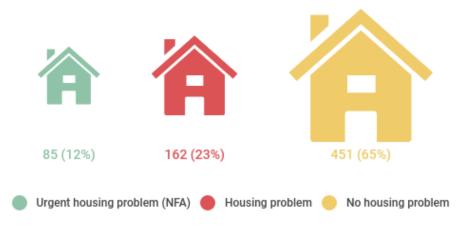
⁵ There were 84 records where disability was not stated and have been excluded from the calculations.

⁶ Please note that clients may have up to three disabilities recorded. Also, note that other disabilities were reported but have not been included in the figure due to low numbers.

HOUSING NEED

While the majority of the 698 Wirral CJIT contacts reported no housing problems, 247 (35%) had some form of a housing problem, with 85 (12%) stating an urgent housing need due to being of no fixed abode (NFA; *Figure 11*). The proportion of Wirral clients that stated a housing problem is higher than the Merseyside figure (25%), while the proportion with an urgent housing need is the same as the Merseyside figure. Furthermore, the overall proportion of Wirral clients with a housing problem in 2018/19 is just below the proportion in the previous year (37%), though higher than in 2016/17 (26%). Similarly, the proportion with an urgent housing need is lower than in 2017/18 (20%), but the same as 2016/17.

Figure 11: Housing need of Wirral CJIT contacts, 18/19

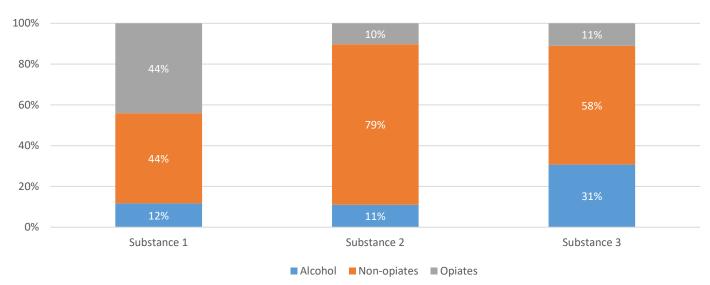


SUBSTANCE USE

In 2018/19, Wirral CJIT reported equal numbers of opiate drugs and non-opiate drugs used as the main substance (n=308; 44%), while alcohol accounted for 12% (n=82; *Figure 12*). The proportion of opiates recorded as the main substance is slightly higher than the Merseyside figure (41%), while the proportion of non-opiates is slightly lower than the Merseyside figure (47%). Notably, the proportion of non-opiates has increased from 37% in 2016/17, while for alcohol it has decreased from 18% in 2016/17. The proportion of opiates recorded as the main substance in 2018/19 is similar to the previous two years (16/17: 45%; 17/18: 46%).

The main substance had the highest proportion of opiate drugs (n=308; 44%), while non-opiate drugs was highest for the second substance (n=416; 79%) and alcohol was highest for the third substance (n=50; 31%; *Figure 12*).

Figure 12: Substance type of Wirral CJIT contacts, 18/19



Taking into account the main, second and third substances combined, one-quarter reported heroin (n=347; 25%), followed by crack (n=340; 24%). These proportions are similar to the Merseyside figures (heroin: 24%; crack: 23%), though are lower than the proportions in the previous year (28% for both heroin and crack). Notably, the proportion of cocaine has increased from 13% in 2016/17.

Figure 13 shows figures broken down by substance one, two and three. Over two in five CJIT contacts in Wirral reported heroin (n=296; 42%) and over one-quarter reported cocaine (n=191; 27%) as their main substance. The proportion of heroin is similar to the Merseyside figure (40%), while the proportion of cocaine is lower than the Merseyside figure (34%). The proportion of heroin recorded as the main substance for Wirral CJIT contacts in 2018/19 is slightly lower than the previous two years (16/17: 44%; 17/18: 45%), though the proportion of cocaine recorded as the main drug has increased from 16% in 2016/17. Half of the CJIT contacts in Wirral reported crack as their second substance in 2018/19 (n=263; 50%), while around three in ten reported alcohol as their third substance (n=50; 31%), followed by other drugs (n=46; 28%) and cannabis (n=39; 24%; Figure 13).

70% 2% 60% 2% 50% 40% 30% 20% 27% 10% 0% Alcohol Cannabis Cocaine Crack Heroin Methadone Other opiates Other ■ Substance 1 ■ Substance 2 ■ Substance 3

Figure 13: Substances used by Wirral CJIT contacts, 18/19

Figure 14 shows the proportions of the main substance by gender. There were larger proportions of cocaine and heroin use reported by men (30% and 43% respectively) when compared to women (14% and 39% respectively), while there were larger proportions of women who reported to use alcohol and crack (17% and 19% respectively) when compared to men (11% and 9% respectively).

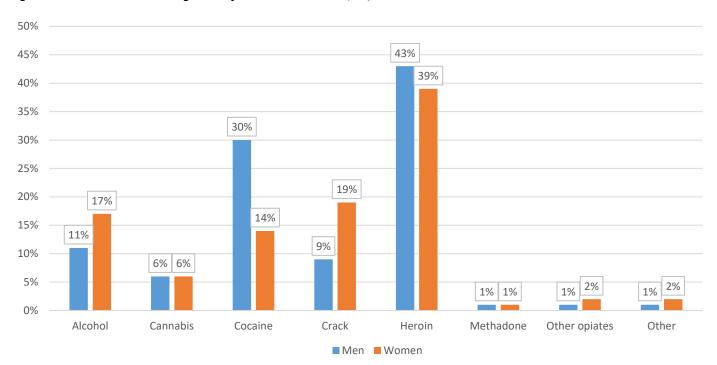


Figure 14: Main substance and gender of Wirral CJIT contacts, 18/19

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 use across the older age groups. Seven in ten 18-24 year olds reported cocaine as their main substance (70%), while 62% of 40-44 year olds, 71% of 45-49 year olds and 66% of clients aged 50 years and over reported heroin as their main substance.

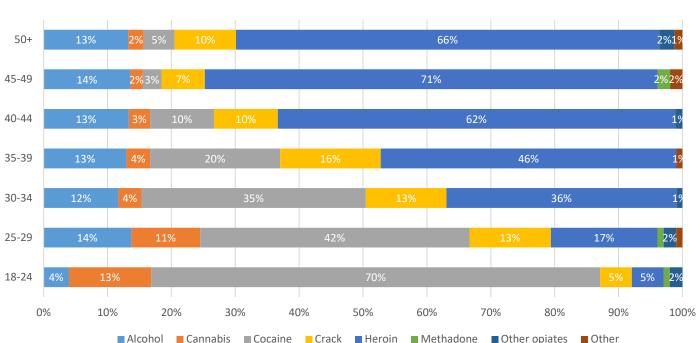


Figure 15: Main substance and age group of Wirral CJIT contacts, 18/19

The route of administration of Wirral clients' main substance is shown in *Figure 16*. Around half smoked their main substance (n=354; 51%), followed by just over one-quarter who sniffed their main substance (n=187; 27%). In comparison, Merseyside figures reported a lower proportion who smoked their main substance (45%) and a higher proportion who sniffed their main substance (34%). Furthermore, the proportion of Wirral CJIT contacts who smoked their main substance has decreased from 59% in 2016/17, while the proportion who sniffed their main substance has increased from 16% in 2016/17.

Figure 16: Route of administration of the main substance used by Wirral CJIT contacts, 18/19

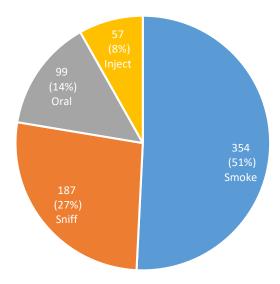
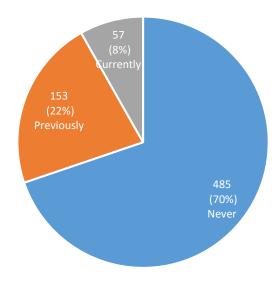


Figure 17 shows that seven in ten Wirral CJIT contacts in 2018/19 stated that they had never injected (n=485; 70%), while 153 (22%) had previously injected but were not currently and 57 (8%) were currently injecting⁷. These proportions are similar to the Merseyside figures and previous two years.

Figure 17: Injecting status of Wirral CJIT contacts, 18/19



⁷ Please note that there were <5 clients who declined to answer and have been excluded from the calculations.

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=331; 56%), while one in five reported to drink between one and four days (n=118; 20%). The proportion of men who did not consume alcohol in the 28 days prior to their assessment is the highest of all five Merseyside areas (Merseyside total: 49%); however the proportion has decreased from 64% in 2016/17.

For women, over half did not consume alcohol in the 28 days prior to their CJIT contact (n=58; 53%; *Figure 18*). This proportion is lower than the other four Merseyside areas (Merseyside total: 59%) and has decreased from 64% in 2016/17.

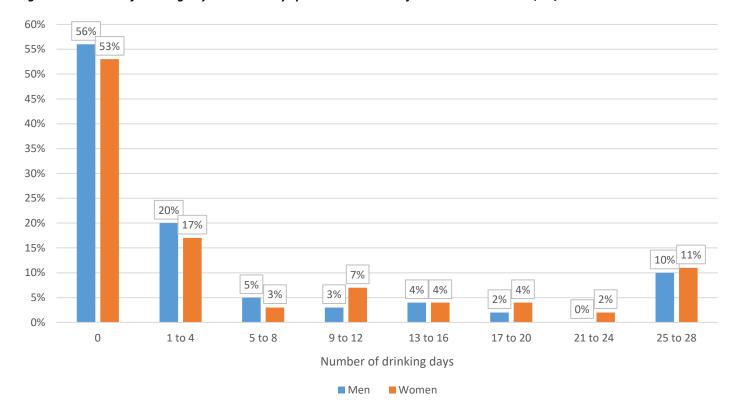


Figure 18: Number of drinking days in the 28 days prior to assessment for Wirral CJIT contacts, 18/19

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 255 men who did drink in the 28 days prior to their assessment⁸, one-third consumed 7-15 units of alcohol daily (n=83; 33%), while 74 (29%) consumed 16-24 units and 59 (23%) consumed 25 units or more. The proportion of men consuming 16-24 units daily is the highest of the five Merseyside areas (Merseyside total: 23%), though is similar to the previous two years (16/17: 30%; 17/18: 28%). Meanwhile, the proportion of men consuming 25 units or more daily is higher than the Merseyside figure (19%) and although a slight increase on the previous year's proportion (18%), it is similar to the figure reported in 2016/17 (22%).

Of the 51 women who did drink in the 28 days prior to their CJIT contact, just under two in five consumed 7-15 units of alcohol daily (n=19; 37%), followed by 14 (27%) who consumed 25 units or more daily (*Figure 19*). The proportion of women who consumed 7-15 units daily is lower than the Merseyside figure (42%) and is similar to the previous year (39%). Meanwhile, the

⁸ There were <5 records where the client reported to consume alcohol in the 28 days prior to their assessment, but did not have the daily average number of units recorded. These have been excluded from the calculations.

proportion of women who consumed 25 units or more daily is the highest of the five Merseyside areas (Merseyside total: 20%) and notably, has increased from 18% in 2016/17.

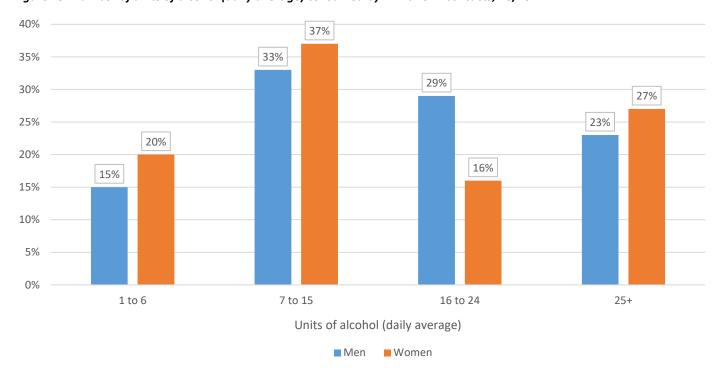
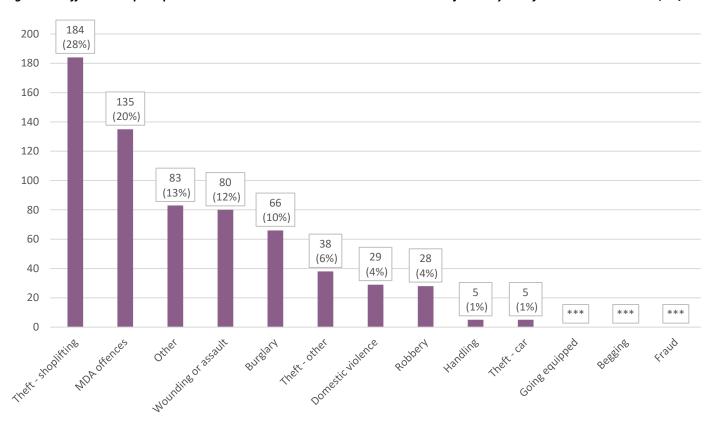


Figure 19: Number of units of alcohol (daily average) consumed by Wirral CJIT contacts, 18/19

OFFENDING

The offence that prompted Wirral CJIT clients' current or most recent contact with the criminal justice system is shown in *Figure 20*. Just under three in ten were theft - shoplifting (n=184; 28%), followed by 135 (20%) Misuse of Drugs Act (MDA) offences. Offences categorised as 'other' (n=83; 13%), wounding or assault (n=80; 12%) and burglary (n=66; 10%) each accounted for around one in ten clients. The proportion of theft - shoplifting is the highest of the five Merseyside areas (Merseyside total: 22%) and although a decrease on the proportion in the previous year (31%), it is the same as in 2016/17. Although the proportion of MDA offences is lower than the other four Merseyside areas (Merseyside total: 28%), it is higher than the previous two years (16/17: 18%; 17/18: 17%).

Figure 20: Offence that prompted current or most recent contact with the criminal justice system for Wirral CJIT contacts, 18/199



INTERVENTIONS

REFERRALS TO STRUCTURED TREATMENT

There were 139 referrals to structured treatment in 2018/19 (125 individuals; Figure 21)¹⁰.

Figure 21: Referrals to structured treatment for Wirral CJIT contacts, 18/19



⁹ Please note that there were 38 records missing the offence that prompted the current or most recent contact with the criminal justice system and have been excluded from the calculations. Numbers less than five have been suppressed to maintain client confidentiality.

¹⁰ Clients not taken onto the CJIT caseload have been excluded from these figures.

RECOVERY SUPPORT SUB-INTERVENTIONS

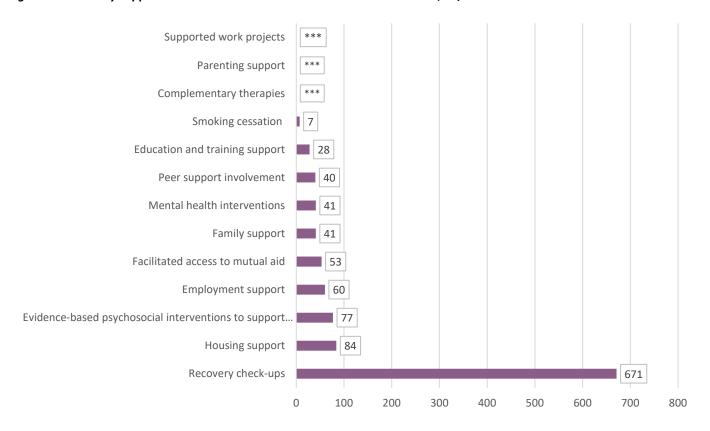
In 2018/19, a total of 690 recovery support sub-intervention assessments were carried out on clients on the CJIT caseload (346 individuals), with a total of 1,106 sub-interventions delivered (*Figure 22*) 10 .

Figure 22: Recovery support sub-intervention assessments for Wirral CJIT contacts, 18/19



Of the total recovery support sub-interventions delivered, around three in five were recovery check-ups (n=671; 61%; Figure 23).

Figure 23: Recovery support sub-intervention delivered to Wirral CJIT contacts, 18/19



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 dataset enables client profiling; including gender, age, ethnicity, disability, residency and housing need, substance use, alcohol consumption and offending behaviour. 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 (Howarth et al., 2012).
- 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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