



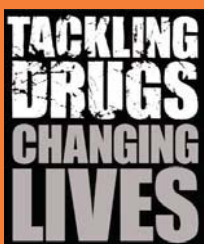
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**ONE HULL** is Hull's Local Strategic Partnership (LSP), which brings together public, private, voluntary and community sectors to create a better city.



**Together Women Project:**



**Hull Launch**

**The Together Women Project (TWP) is having an open day on Friday 22nd October to mark their launch in Hull. The open day is between 11am and 3pm for both professionals and women interested in the services offered.**

The Together Women Project (TWP), Hull Women's Centre (HWC) and Preston Road Women's Centre (PRWC) are working in partnership to provide a range of services designed to tackle offending behaviour in Hull. This new gender specific service is funded by the Ministry of Justice and aims to support women in the criminal justice system and those at risk of offending by providing a holistic package of interventions. This support is delivered at the 'One stop Shop' on George Street and includes -

- > 1:1 support, help and advice
- > Advocacy work with statutory CJS agencies
- > Liaising with external agencies (social care, housing, substance misuse services, debt)
- > Crèche (provided by HWC)
- > Counselling service (delivered by Haven Therapeutic Services)
- > Confidence building groups
- > Domestic abuse awareness
- > Health workshops
- > Budgeting advice
- > Anger management course
- > Customer Involvement Group (coffee morning)
- > Arts and crafts group
- > Parenting course
- > Appointments with housing advisor
- > Appointments with DIP worker
- > Appointments with HomeStart worker

Women can be referred both pre and post sentencing (with woman's consent).

**TWP** will also be running surgeries at Liberty House East every Wednesday 9am – 12.

**Together Women**  
120-122 George Street, HULL, HU1 3AA.  
T-01482 218125  
F-01482 618112

# Drug Link Street Drug Trends Survey

This annual survey captures emerging drug trends by speaking to a range of organisations and experts in 20 cities in the UK.

The 2010 survey highlights the mixed impact of the ban on mephedrone, the recession effecting sales tactics and Britain's rising alcohol problems.

The full report can be found at:

<http://www.drugscope.org.uk/Documents/PDF/Publications/Druglinkpromosept10.pdf>

#### The ban on Methedrone has resulted in:

- Dealers selling in smaller quantities.
- Prices have increased from around £5 a gram to £20 a gram.
- Half (10) of the cities revealed a significant drop in use.
- 7 cities reported little change in use following the ban.
- Most prolific customers remain young people.
- Some people reported that the ban had driven use underground and resulted in less people going to services for help until their use had spiralled out of control, because of the drug's illegality.
- Methedrone users have not uniformly settled for a replacement legal high. In some areas Naphyrone (NRG-1) was taken up and in others people returned to illegal highs, i.e. Cocaine.

#### The effects of the recession have resulted in:

- Dealers are selling in smaller quantities.
- Smaller quantities have in effect increased the price of drugs, as the smaller the quantity the more expensive they become.
- Police have become more successful in tracking down cannabis farms and residents are more aware of signs of cannabis farms, therefore dealers have adapted to smaller 'grows' in lofts and cellars and there has been an increase in imports of more expensive cannabis from abroad. Importing may also be a reason there has been a reported increase in the strength of skunk.

#### Alcohol:

- 18 of the 20 cites reported increase in problem alcohol use within drug using communities.

#### Other key findings:

- Black market diazepam and cocaine continue to be on the rise, despite low purity.
- Popularity of ecstasy continues to decrease, mainly because it contains so little MDMA.
- Fewer young people are getting into problems with crack and heroin.
- Ketamine is gaining popularity in some areas.
- Most areas reported that with the use of mobile phones, much of the local street trade had moved to people's homes.
- Drug prices have remained steady, with the only significant rise being cannabis.

#### AVERAGE STRET PRICES 2010 £

Herbal cannabis (standard) per qtr ounce:	30
Herbal cannabis (skunk) per qtr ounce:	50
Resin cannabis per qtr ounce:	26
Heroin per bag:	10 for 0.2
Cocaine per gram:	42
Crack cocaine per rock:	10 for 0.2
Ecstasy per pill:	2.65
MDMA powder/crystal per gram:	32
Amphetamine per gram:	9
Ketamine per gram:	20
Diazepam per 10mg pill:	1
Mephedrone per gram:	19

# Drug Treatment System Re-design and Consultation

The drug treatment system in Hull is being re-designed, to improve outcomes for drug users – with the aim of seeing more people recovered from drug use and reintegrated back into society.

Previous research has outlined a number of changes which would improve treatment and recovery. The Drug Strategy Team are building on this research by conducting consultation with treatment service users, the public and partners to determine how the future system should work to best meet the needs of people in Hull.

**The consultation will be open for 12 weeks, until 6th December and it is hoped the new system will be in place by July 2011.**

A consultation information document explains further the background for the re-design, how the treatment system currently works, where areas of improvement have been identified and a proposed future model. The questionnaire gives you the chance to give your views about how the new treatment and recovery system should look.

The consultation information document and the web based questionnaire are available on the Hull City Council Recovery from Substance Misuse web pages:

[http://www.hullcc.gov.uk/portal/page?\\_pageid=21,107870&\\_dad=portal&\\_schema=PORTAL](http://www.hullcc.gov.uk/portal/page?_pageid=21,107870&_dad=portal&_schema=PORTAL)

Paper copies of the documents will be available in community venues, with free post envelopes for local residents to give their views.



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## Hull Partnership Drug Strategy

Hull's drug strategy outlines how the ONE HULL Community Safety Partnership (Citysafe) and its partners will work together to produce long-term reductions in the harms associated with drugs to communities, individuals and their families.

The strategy is available at:

[http://www.hullcc.gov.uk/portal/page?\\_pageid=221,643937&\\_dad=portal&\\_schema=PORTAL](http://www.hullcc.gov.uk/portal/page?_pageid=221,643937&_dad=portal&_schema=PORTAL)

### Impact of prescribing practice of methadone on reduction in deaths (BMJ)

New research published by the British Medical Journal has found that changes in methadone prescribing practice in the 1990s, particularly the introduction of daily supervision of doses in the early stages of treatment, have been highly effective in making methadone treatment safer - achieving a fourfold reduction in deaths involving methadone across England and Scotland.

To read the research go to:

<http://www.bmj.com/content/341/bmj.c4851.full>



### Hepatitis B Vaccinations

Now available to those living with an injecting drug user.

Contact The Point on **01482 221 551** for more details.

# PEEIT Update



## (Prevention, Education and Early Identification Team)

- > The **PEEIT** is a partnership between Compass and Hull City Council and is delivered by ReFresh.
- > Since the service began in February, Young People's Outreach Workers have engaged with 1613 young people across the city. They are now working with schools, colleges and other agencies to deliver targeted group sessions to young people.
- > Parenting Practitioners have engaged with 68 families. Their remit is to work with parents whose young people misuse substances or alcohol or where the parents themselves use.

The team would like to receive more referrals from adult services, in order to support parents with a variety of family challenges including managing behaviour and relationship building.

- > We also offer training through the Safeguarding Children's Board and through bespoke packages for schools in Drug Awareness, Alcohol Awareness and Young People and Substance Misuse. Since the beginning of the project more than 150 people have attended training.

If you'd like to discuss the services **PEEIT** offers or make a request for service please contact Sarah Turner on 331059.

# Think Family Update

- > **Think Family briefings:** briefings on the Think Family approach across Children and Adult services have been given by the Think Family champions. The briefings focus on how services can work more effectively together when working with families with multiple problems and included information about CAF (Common Assessment Framework) and Hidden Harm.

Briefings have been rolled out to drug and alcohol services in Hull and have included mental health services.

Briefings are still available to staff and organisations who have not yet attended – please contact Lynne Froud on 822819 or Sara Johnson on 616179.

The Think Family champions can also be contacted if you have concerns or queries relating to families; they will provide advice and signpost to appropriate services.

- > **Think Family Forums:**

A forum group is now meeting bi-monthly involving a range of representatives from organisations which work with families. There are 3 more forums planned – November, January and March – which aim to facilitate and support Think Family approaches within services.

Treatment service representatives are welcome and encouraged to attend.

If you would like to attend please contact Catherine Law on 615247.

Think Family practice - making sure that the support provided by children's, adults' and family services is coordinated and takes account of how individual problems affect the whole family.

**Spotlight on:**

# Substance misuse in pregnancy; multi agency support and care

<b>6 month recording period</b>	<b>No. women using substances at birth</b>
October 09 – March 10	28
April 10 – September 10	11

The last 6 months has seen the lowest number (11) of women misusing substances at the time of birth since recording began in 2001.

This may be due to the additional work being done by drug services to raise awareness around contraception.

**When it is identified that a pregnant woman is using drugs, or alcohol to an excessive level, a multi-agency approach ensures support and a care plan for the woman, child and family throughout pregnancy and once the baby is born.**

Substance misuse will be identified via self disclosure by the woman, if the woman is in drug treatment or via the information given on referral from a GP.

The Substance Users Assessment Tool (SUAT) meeting takes place monthly to discuss cases. It includes staff from social services, drug services

(Quays/ Compass), the lead midwife, managers from antenatal and postnatal wards and a representative from the Special Care Baby Unit. (The Special Care Baby Unit will then have an indication of the number of babies who will be on the ward.)

**The aim is to engage and retain pregnant women who use drugs/alcohol in treatment as early as possible by:**

- Supporting the woman and family to enable baby to remain in their care (where appropriate) by reducing the risk of harm/potential harm to the child where drugs/substance use is a problematic issue with parents.

- Make sure the woman is aware of the harms that can be caused to the baby by providing realistic information.
- Get the woman stable
- Ensure the baby is healthy; including medication for withdrawal where it is needed, testing for Hep C
- Plan for when the baby is born
- Refer to community services to ensure appropriate support services are available to the women and their families, i.e. health visitors, Surestart, CDP
- Care plan (pre and post delivery) communicated to hospital staff, and care continued seamlessly in the community
- Transfer to Local Authority care will only take place in extreme cases where a pre-birth assessment has been undertaken and it is deemed that the child would be at significant risk of harm upon discharge from the hospital.

**Some key figures, based on the 28 women from the previous 6 months:**

No. of cases involving drug use (may include alcohol as well)	25
No. of cases involving alcohol use alone	3
% who present after 20wks gestation	43%

The earlier in pregnancy a woman presents, the more support can be given to help address issues. Ideally women should be booking in with the hospital at 12-14 weeks.

Hepatitis C positive	61%
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If a woman tests positive, the baby can then be monitored with regular testing for Hep C and look to have vaccinations.

No. which go on to Special Care Unit	79%
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22 of the 28 babies went on to the Special Care Unit upon delivery. This equated to a total of 357 days for babies born to substance misusing women.

If a woman is on 30mls methadone or over, the baby will automatically go to Special Care for a minimum of 7 days.

No. of babies who needed medication (Morphine) for withdrawal	5 babies (18%)
No. of women NOT in drug treatment at time of delivery	8 (29%)

**Of the 28 born between October and March:**

Went home with parents	15
Home subject to Child Protection plans	6
Local Authority care	5
Still born	2

**Contact:**

**Alison Purcell, Social Worker, Women & Children’s Hospital. Tel: 675696.**

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# Housing



**Research has been conducted by Paul Hudson from Humbercare into the blockages to accessing housing by people involved with drug treatment services. Over the past year Paul has discussed housing issues with 160 people in treatment.**

Research has looked at blockages including availability, bonds, high cost rentals, under 25s receiving a lower housing allowance (national issue) and past arrears.

The findings also showed that only 35% of housing appointments were attended by people within treatment – which is a further issue that needs to improve for this client group to achieve independent living.

There have been a number of improvements to processes over the last year, including the introduction of a bi-weekly multi-agency 'hard to house' panel (including HCC Homeless Section) which has seen a high number of successes. The

introduction of the Minerva Project within prison, which has a seconded housing worker, has also seen improvements in access to housing upon release.

In October a Landlord Event is to be held, to encourage more private rented sector landlords to accept people in the treatment system as tenants and to reduce their bond restrictions. It is hoped this event will go a long way in eliminating a number of barriers.

The Drug Strategy Group will pick up findings from this report with the aim of further improving access and pathways between treatment and housing.

# hull

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## Drug Strategy Team (DST)

**Vicky Harris:** *Head of Drug Strategy and Offender Management*

**Diane Harvatt:** *Reducing Reoffending Manager*

**Paul Robinson:** *Contracts Manager*

**Andrew Major:** *Performance Officer*

**Anna Pilgrim:** *Review and Community Development Coordinator*

**Nicola Harris:** *Admin Assistant*

DST main telephone number:

**01482 612 327**

The team would be particularly interested to hear from community/voluntary groups and professionals regarding any drug related work or initiatives. If you would like to include information in future editions please contact Anna on **01482 612 816**.

This newsletter can be made available in other formats (large print, audio and Braille as appropriate) Please telephone 300 300.