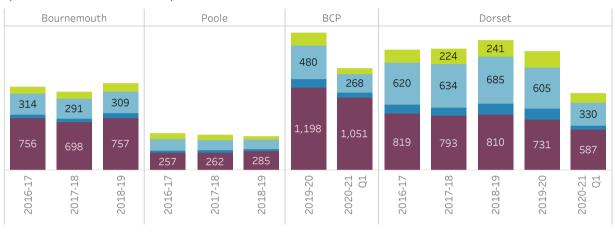
NOVEMBER 2020



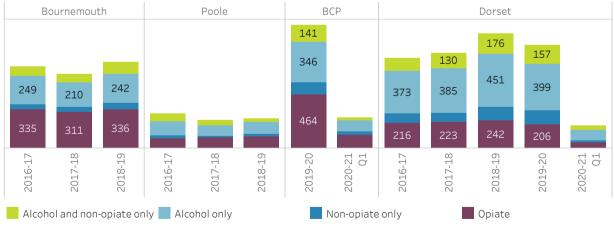
#### Number of Clients in Structured Treatment

(2020-21 data is as at end of Q1)



#### Number of New Presentations to Structured Treatment

(2020-21 data is as at end of Q1)

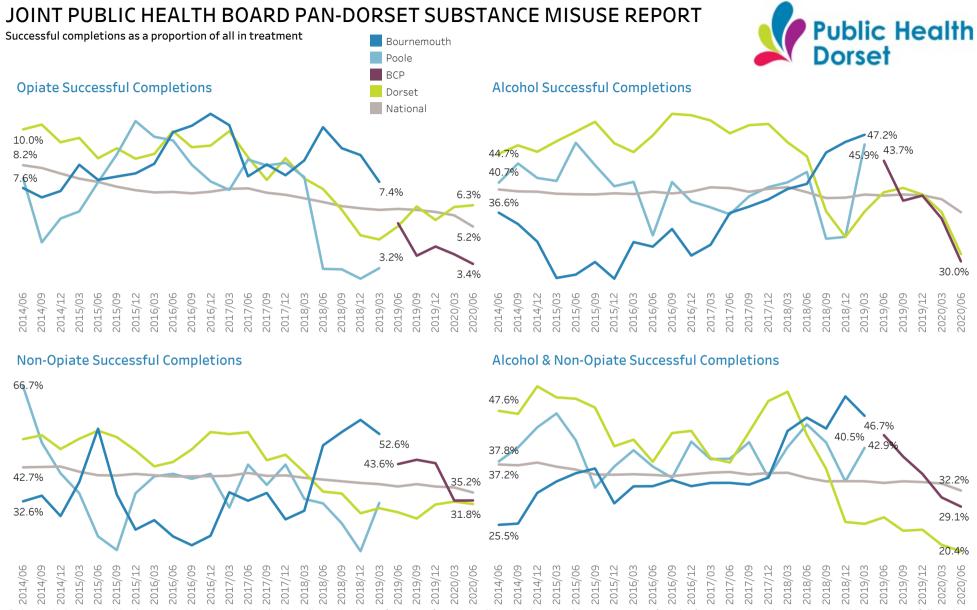


#### **Estimates of Unmet Need**

The estimated proportion of people in each area who are dependent on opiates and/or crack cocaine or alcohol not in the treatment system

|             |                      | 2015-16 | 2016-17 | 2017-18 | 2018-19 |
|-------------|----------------------|---------|---------|---------|---------|
| Bournemouth | Alcohol              | 87.2%   | 86.1%   | 87.0%   | 84.9%   |
|             | Opiates and/or crack | 49.7%   | 57.8%   | 60.9%   | 59.2%   |
| Poole       | Alcohol              | 85.7%   | 83.7%   | 85.9%   | 87.8%   |
|             | Opiates and/or crack | 52.9%   | 51.1%   | 49.8%   | 55.2%   |
| Dorset      | Alcohol              | 77.9%   | 77.0%   | 75.4%   | 72.9%   |
|             | Opiates and/or crack | 46.9%   | 48.6%   | 50.0%   | 43.7%   |
| National    | Alcohol              | 81.3%   | 78.1%   | 82.9%   | 82.6%   |
|             | Opiates and/or crack | 49.2%   | 49.6%   | 51.7%   | 54.0%   |

Increasing the number of opiate users engaged in treatment in BCP has been a specific priority for commissioners. Engagement rates are now approaching the national average, and several people who have previously struggled to engage with treatment are now making progress as part of the Everyone In response to COVID-19. However these increased numbers have put services under pressure, prompting a review of the design and delivery of the specialist prescribing service in BCP. Numbers remain stable and acceptable in Dorset.



Opiates - in Dorset and Poole recommissioning in 2017 led to a disruption in performance for opiate clients with gradual improvements after the first year. Completion rates in BCP continue to fall as the overall number of people in treatment increases. This would happen even if the same number of people were completing successfully but added to this the increased numbers place pressure on the services. Alcohol - We would expect performance around the national average. With the emergence of COVID-19 completion rates have fallen as access to some interventions (eg detox) has been limited. Performance related to non-opiates is around national averages as would be expected. Variation is largely due to small numbers. Completion rates for alcohol and non-opiate clients in Dorset require further investigation.

Time in treatment & alcohol related hospital admissions

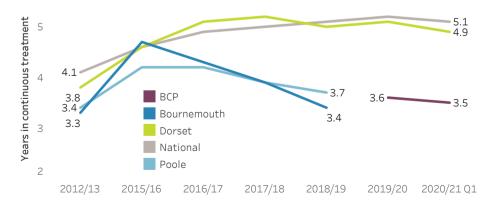


#### Opiate Clients in treatment for 6 years or more

Number of clients in treatment for stated time period / all clients in treatment at the end of the period

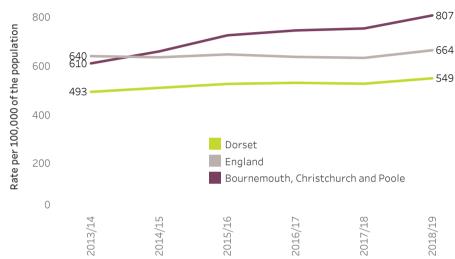


#### Opiate Clients - Average Time in Continuous Treatment (in years)



#### **Alcohol Related Hospital Admissions**

Rate per 100,000 of the population all ages - Narrow (Local Alcohol Profiles for England Indicator 10.01) Where an alcohol-related illness was the main reason for admission or identified as an external cause



As the treatment system in Bournemouth has engaged a large number of new clients the average length of time people have spent in treatment has fallen. Dorset continues tomirror the national average.

Alcohol related hospital admissions are higher than the national average and rising in both Bournemouth and Poole while the figure for Dorset is relatively stable. This may have implications for how the acute trusts and other partners address alcohol related issues.

**Blood Borne Viruses** 



### Percentage of Clients in treatment who accepted Hep B immunisation

## Percentage of clients in treatment who have completed Hep B course



# Hep C latest test date for clients who currently or have previously injected (for clients in treatment during each year)

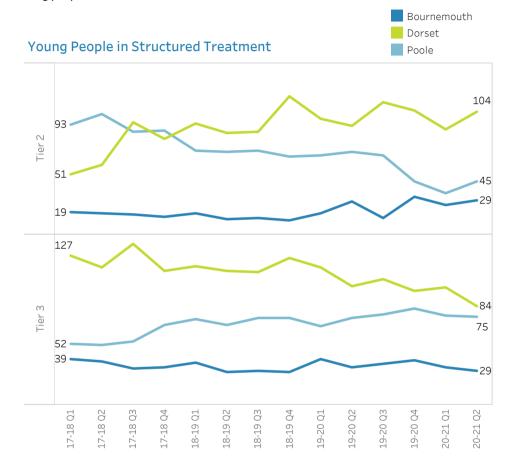


Hep C Date within last year
Hep C test within 1 year
Hep C tested over 1 year ago
No Hep C test date recorded

Bournemouth shows good and improving performance in relation to delivering blood borne virus interventions, particularly in relation to hep C tests. This is likely to be due to specific targeted work to engage more people in new treatments. Dorset and Poole rates have also slightly improved, potentially as a result of the expansion of the Hep C programme across the county. There is still, however, work to do to further improve performance.

Young people in treatment

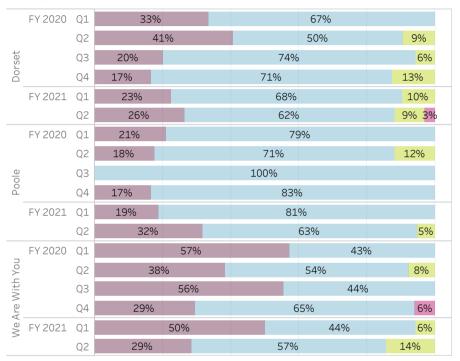




As noted in previous reports a higher number of young people are engaged in Dorset due to the approach taken locally and this is reflected in the levels of vulnerability.

The number of tier 3 clients has dropped as they are being recorded more accurately as tier 2. In addition the latest figures tend to underestimate tier 3 numbers as a significant portion of the tier 2 clients will transfer to tier 3 over the next quarter.

# Young People - Closures



Unplanned Exit

Planned Exit

Transferred not Custody

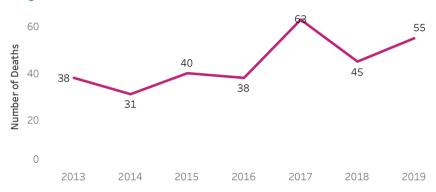
Transferred in Custody

Drug related deaths and Naloxone provision



Survived

## **Drug Related Deaths Pan-Dorset**



# **Drug Related Deaths Locations**

|                       | 2013 | 2014 | 2015 | 2016 | 2017 | 2018 | 2019 |
|-----------------------|------|------|------|------|------|------|------|
| Bournemouth           | 20   | 21   | 19   | 19   | 27   | 18   | 23   |
| Weymouth and Portland | 8    | 4    | 8    | 3    | 12   | 7    | 7    |
| Poole                 | 6    | 5    | 3    | 7    | 7    | 9    | 8    |
| West Dorset           | 3    | 1    | 2    | 3    | 4    | 4    | 7    |
| North Dorset          | 1    |      | 3    | 3    | 6    | 5    | 4    |
| Purbeck               |      |      | 2    |      | 2    |      | 2    |
| Christchurch          |      |      | 2    | 2    | 4    | 2    | 1    |
| East Dorset           |      |      | 1    | 1    | 1    |      | 3    |
| Grand Total           | 38   | 31   | 40   | 38   | 63   | 45   | 55   |

Drug related deaths continue to be a priority locally and are being closely monitored to assess the impact of changes resulting from COVID-19. Early indications are that 2020 figures will be in line with 2019.

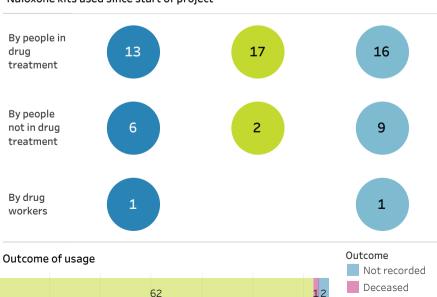
There is still work to do to improve Naloxone distribution particularly in relation to people not currently in treatment. We are exploring delivering this through other partners but are limited by the current regulations which mean that housing support providers for example, cannot generally distribute this medicine.

#### Naloxone Provision

#### Number of kits issued to date

|                         | Bournemouth | Dorset | Poole |
|-------------------------|-------------|--------|-------|
| Client                  | 519         | 521    | 257   |
| People not in treatment | 219         | 137    | 186   |
| Worker                  | 49          | 18     | 14    |

#### Naloxone kits used since start of project



Created and maintained by the Public Health Dorset Intelligence Team Data Source: Dorset Police DRD Coordinator and Halo