

Derry City and Strabane District Council

Minutes of Meeting of the Health and Community Committee held in the remotely - Remotely on Monday 10 May 2021 at 4.00 pm

Present: - Alderman Guy (Chair); Aldermen Devenney and Warke; Councillors R Barr, Burke, Duffy, Edwards, Farrell, Ferguson, Harkin, Logue, McHugh, Mooney and Reilly.

Non-members of Committee:- Aldermen Hussey and Kerrigan; Councillors J Boyle, Carr, Dobbins, Doyle, Durkan, Gallagher, McKinney, Mellon and O'Neill.

In Attendance: - Director of Health and Community (Mrs K McFarland), Head of Health and Community Wellbeing (Mr S Donaghy), PA to Health and Community Director (Mrs L Shields) and Committee Services Assistant (Mrs T Johnstone).

SHC7/21 Notice and Summons of Meeting

The Director of Health and Community read the Notice and Summons for the Meeting.

SHC8/21 Member Attendance and Apologies

The Director of Health and Community recorded Members attendance. No apologies were received.

SHC9/21 Statement for Remote Meetings

The Chairman read the statement for remote meetings.

SHC10/21 Declarations of Members' Interests

Councillor Reilly declared a pecuniary interest in Agenda Item 6 as a member of staff at the Alzheimer's Society.

Councillor Duffy declared a pecuniary interest in Agenda Item 6 as an employee of First Housing.

Open for Decision

SHC11/21 Chairperson's Business

There was no Chairperson's Business.

SHC12/21 To receive an outline of services provided within the Derry City and Strabane District Council area relating to addiction and drug users including enforcement (as agreed at HC109/21 and relating to Council Motion C153/21 and Committee Resolution HC40/21)

The Chair noted apologies given by the following representatives, who were unable to attend the meeting:

- Mr Tommy Canning, Northlands. He advised that Ms Nuala Hegarty would make representations on his behalf.
- Ms Karen O'Brien, Director of Adult Mental Health and Disability Services, WHSCT

The Chair welcomed the representation from the various organisations to the meeting. He reminded them that due to the high number of presenters that they were allocated a time limit of 5 minutes each for their presentation, after which Members would be given the opportunity to comment or seek points of clarification if they so wished.

Mr Liam Dunne, Head of Service, Western Health and Social Care Trust

Mr Dunne, Head of Service at the Western Health and Social Care Trust (WHSCT) presented a brief overview to Members regarding addiction services throughout the Trust area. He stated that core services received approximately 2,500 referrals per year with a nine week waiting target to action those referrals. He noted the challenges faced by the service such as;

- The significant impact on the service due to the coronavirus pandemic which resulted in the service having to implement new ways of working
- Waiting lists have been successfully managed during the lockdown period with an increase in patients attending appointments due to them taking place in a virtual setting

- An increase in issues and cases within addiction services such as patients presenting with more than one issue or abusing one particular substance
- Demand in services was an ongoing challenge and whilst the Trust could currently deal with the demand, there was a significant increase in demand for lower tier levels such as Tier 2 presenting to GPs and mental health practitioners.
- Important to emphasise to the public of the services that are available rather than the lack of services as that tended to lead to a loss of hope for people who were struggling with addiction issues.

Ms Denise McCallion, Health and Social Wellbeing Improvement Manager, Public Health Agency

Ms McCallion thanked Members for the opportunity to present to the Committee in relation to the PHA commissioned alcohol and drugs services across the Western Trust area. She highlighted the strategic framework that the organisation worked towards regarding drugs and alcohol misuse. She further highlighted the key services commissioned by the PHA;

- Youth Treatment
- Hidden Harm Intensive Therapeutic Support Service
- YES (Youth Engagement Service)
- Targeted Prevention
- Adult Treatment
- Connections West
- Low Threshold Service
- Workforce Development
- Drug and Alcohol Mental Health Service (DAMHS)
- Substance Misuse Liaison Service
- Needle Syringe Exchange Scheme

Councillor Farrell thanked the representatives for the informative presentations and the work carried out by the organisations to assist and support the people of the city and district who suffered from addictions. He referred to the recent Health Inequalities Report and expressed concern at the statistics regarding substance misuse within the Western Trust and the Council area. He referred to Mr Dunne's

comments regarding the demand in services and asked if the Trust was adequately equipped to respond to the growing demand for alcohol and drug service and also when the waiting lists to access psychological therapies would begin to decrease. He noted that a strategic review of addiction services throughout the North was currently taking place and asked if there were any timescales in place for when this would be completed. He noted Council's corporate position in support of a detox centre for the city and district and enquired if any progress had been made in this regard.

In response, Mr Dunne believed that the Trust was adequately resourced in regards the types of services that the Trust must provide. He stated that there were regional reviews taking place and that there were always going to be increased demands for various areas and services. He concurred that the statistics for the North West area were concerning but the management of addiction issues was not just under the remit of addiction services. He believed that it was a societal issue that also should be considered. He believed that the new strategy had aims within it to address those issues. He stated that the Trust used its resources to the full and also fully engaged with the other partnerships commissioned locally by the PHA resulting in a raft of community, voluntary and statutory services being available.

Continuing, he advised that the lengthy waiting lists were in relation to Adult Therapy Psychological Services (ATPS) for people with addictions. He advised that the Trust was increasing its psychological resources within addiction services. He further advised that there was also the establishment of a new regional trauma network, enhanced by the recruitment of a psychologist and CBT nurses posts within the Trust. He acknowledged that the waiting lists for ATPS was significantly high at this moment in time. However, in comparison, the waiting list to access adult mental health services through the Primary Care Liaison Services would have been in a similar situation approximately two years ago. He stated that the waiting list for this had now been successfully managed.

Ms McCallion referred to the Health Inequalities Report and stated that it did indeed paint a drastic picture for the Derry City and Strabane Council area. She stated that it was important to note that in terms of addressing the alcohol and drugs issues across the city and district, the PHA cannot do this alone, therefore it was important to have a collective response and work across all government departments and Council.

She advised that the services supported by the PHA were involved in early intervention, treatment and support. She stated that the organisation allocated £1.2m annually into those services run by the WHSCT. She understood that some of the services had a more significant demand, therefore the PHA attempted to expand the services each year. However, the drugs and alcohol landscape was constantly changing.

She stated that during the consultation period for the new Substance Use Strategy, the North West did have a strong voice in terms of shaping the strategy. She advised that as part of that work there will be a review of commissioning services for drugs and alcohol across the region which would give an opportunity for people to submit their views.

In relation to a query regarding a detox centre, Mr Dunne believed that the Health Minister, Robin Swann MLA, had recently met with representatives and members of the public in regards to that matter. He stated that his department had not received any feedback regarding the outcome of those particular discussions.

Councillor Mellon welcomed the presenters to the meeting and thanked them for the presenting to the Committee. She felt that it was important to find a resolution on the best way to support people struggling with addiction. She stated that everyone must be careful in how the language used could be interpreted and the subsequent impact that could have. She referred to young people throughout the city and district with addiction issues and asked how many of those had accessed the programmes. She also queried what Tier 3 and 4 services were available for children and young people in the area.

She stated that in her opinion, there was a disparity regarding perceptions of what local services were available compared to information from constituents, family and friends and those who suffered with addiction or mental health issues. She queried what public messaging had been carried out to raise awareness of the services that were available. She felt that the pathway and communications team within the Trust were a hurdle and a barrier in this regard. She asked how often stakeholders and others involved in the provision of addiction services had collaborated either for networking, sharing information or to provide updates. She then referred to incidents of people vaping spice throughout the city and district and enquired if there was concern regarding the prevalence of those incidents.

In response, Ms McCallion concurred that the correct use of language was so important, particularly when communicating with vulnerable people. She believed that language was crucial in terms of providing support. She stated that the new Substance Use Strategy was positive in terms of preventing harm and empowering recovery which contained good, positive language.

She stated that a number of people were not accessing services due to the fear of stigma which must be addressed. In relation to Councillor Mellon's comments around communication, she advised that the communications sub-group, was a new sub-group with representation from Council, WHSCT and PHA. She stated that it was also hoped to involve representation from other Councils in the Western area and the PSNI as a collaborative response. She stated that the communication piece was key in terms of letting people know of the services available, but more importantly informing them on how to access those services. She advised that a communications strategy and plan would be put in place which will detail the actions that were needed to be taken forward to address those issues.

Continuing, she advised that in relation to young people accessing Step 2 services, over the lockdown period there were 252 young people accessing that particular service. She advised that those young people then had a care plan in place and that some may be part of that service for a longer period of time than others. She stated that the service was a person centred approach with individual care plans.

She advised that in relation to partnership and networking, the Western Drug and Alcohol Co-ordination Team meet 3 to 4 times annually. She stated that the team produced a 3-year action plan. However, it was a fluid plan that was reviewed once emerging issues of concern within the locality had been identified. She advised that the drug and alcohol exchange group met every 6 weeks with attendance by key stakeholders within the drug and alcohol field. She stated that this enabled the building of networks and relationships solely for those workers in the drug and alcohol arena and colleagues in the Trust and PSNI. She stated that there were 3 drug and alcohol forums which was a unique set-up for this area, facilitated by the PHA Connections Service and those forums met on a regular basis throughout the year. In relation to the vaping of spice, she stated some isolated incidents had been reported. However, at this time it was not a significant issue in terms of presentation to services or the information exchange group.

In response, Mr Dunne referred to Tier 3 and Tier 4 provision for children and young people. He advised that his particular service area related to 18 year olds and above. However, there were addiction workers within the CAMHS service for child and adolescent mental health services and they had access to specialist help within the adult alcohol and drugs services. He stated that although this service had the lower age limit of 18, it did not prevent it becoming involved with people under that age if they required more specialist input.

Councillor Edwards extended his thanks to the presenters for attending the meeting. He referred to the waiting list for the ASHA centre in Omagh which was currently at 25 and asked for more detail regarding proposals for additional staffing to that facility. He also asked what support those people on the waiting list were receiving. He welcomed the youth initiatives by the PHA and asked if these were also accessible in rural areas throughout the city and district.

In response, Mr Dunne stated that anyone on a waiting list for ASHA had to be on a list for Tier 3, therefore they could currently access drugs and alcohol services with key workers. He stated that the coronavirus pandemic had badly impacted on the waiting lists for ASHA and other regional units throughout the Trust area and that work was ongoing towards how these waiting lists could be reduced. He advised that services were in place for Tier 4a and Tier 4b which would enable the Trust to dovetail with services provided with organisations such as Northlands who provided rehabilitation and counselling.

Councillor Doyle expressed his concern that throughout local communities, there was a significant increase in people who needed support and access to addiction services. He noted that from 2017 when the service began, drug usage in the Derry area had risen significantly since then. He felt that the detox service was important because of the significant number of people from the area that needed such a facility. He referred to comments by Mr Dunne regarding the appointment of a regional post. He advised that Council had sent a letter to the Trust regarding Tier 4 services, requesting that a specialist detox provision be centred for this city and district and asked for views on the matter.

Continuing, he advised that he attended the recent meeting with the Minister for Health and noted that the Minister had not ruled out a detox centre and felt that he was welcoming towards such a facility. He believed that the key message was that people needed to be aware of

the services available to them and that Council's communications department could assist and support in this regard.

He concurred with the remarks made by Councillor Mellon in regards to disparity of what was heard on the ground compared to discussions at meetings such as this. He referred to the Western Drug and Alcohol Co-ordination Team (WDACT) and enquired if the demands for a detox centre for this city and district had been discussed at those meetings.

Alderman Devenney expressed concern at the increased incident of drug abuse throughout the city and district and also the significant waiting lists for those suffering from addiction to access support services. He stated that as a rural Councillor he consistently raised the issue regarding how messaging regarding accessing services was being relayed to those in the rural areas. He asked how messaging to tackle the stigma of addiction was being relayed to the public to encourage them to seek help. He stated that the DUP were fully supportive of a detox centre in the Council area.

In response, Ms McCallion advised that services were available in rural areas. She advised that if a self-referral or a referral from any agency was received, a worker would meet them, pre-covid face-to-face at a locality that suited them. She advised that local health centres or other facilities within communities had been used to facilitate this. Therefore, if individuals from rural communities presented themselves for help and support they were definitely seen by the service providers.

Councillor Harkin thanked the representatives for their detailed presentations. He stated that it was clear that there were some excellent services and a lot of dedicated people who worked tirelessly to protect people and keep them safe. He referred to the Health Inequalities Report and described it as shocking. He believed that the Stormont Executive had created a situation in the North's most deprived areas which he felt was unacceptable. He stated that the Executive did not have a strategy to combat poverty and those startling statistics were an outworking of that.

He stated that it was important to use the correct language to make people aware that there was help available. He asked the representatives if they had witnessed the growing deprivation and the type of services that people have been required to access. He referred to the stigma attached to addiction and that a tremendous amount of people were working to break the stigma around addiction and mental health. However, he expressed concern at the criminalisation of

drug use which created another layer of stigma. He asked the representatives for their views on the matter. He referred to the budget towards mental health services, stating that it was dire compared to other regions and asked what impact this has had on services.

In response, Mr Dunne stated that there were issues for some people going to their GP to ask for help. He stated that the Trust was attempting to implement a process which would avoid people having to go to their GP in the first instance as there were a number of Tier 2 services available that can be accessed without a referral from a GP. He stated that the Trust was also trying to include Tier 3 to help avoid that stigma that may be faced by some people who did not wish to contact a GP.

Councillor Ferguson thanked the representatives for their presentation and for all the work carried out by the organisations. She stated that the message 'hold for hope' was very important. However, she believed that was not how people on the ground were feeling. She expressed concern that some people with mild drug abuse issues would present themselves to the Emergency Department of the hospital or their local GP and had been sent home to try and deal with it themselves with no support. Therefore, she believed that this had the potential for situations to escalate. She stated that there did not seem to be a pathway there for those people and felt perhaps this was due to a lack of knowledge regarding what services were available. She stated that the message of hope needed to break through to other aspects of the service within the Trust. She referred to young people's prevention and stated that as a rural Councillor she had concerns regarding young people vaping spice in rural villages and had been informed by primary school principals about such incidents. She believed that prevention was taking a proactive approach to reaching that younger age group and asked if this would be included in the new strategy.

In response, Mr Dunne stated that in relation to those with mild substance abuse issues that there was an education element for staff within the Trust regarding understanding what services were available as well as for the general public. He stated that this was also the role of the substance abuse liaison nurse to indicate which organisations within the community could help and support that particular person.

Councillor Gallagher believed that if the battle against alcohol and drug addiction was going to be won, it would not be won in the hospitals or the detox centres, but in the home. He stated that parenting

programmes were important as children as young as 11 were reported to be taking drugs. He stated that in his opinion, self-check drug testing kits should be available to all parents who requested them in order to check their children for drug use. He stated that parents have experienced difficulty in accessing those kits which needed to be addressed.

In response, Ms McCallion stated that in relation to his comments regarding parenting, she was not in a position to comment on that matter. However, she stated that parent/child communication was key, not only in relation to drug and alcohol issues but also sexual, mental health and other issues. She advised that there were a number of parenting programmes taking place throughout the city and district that should be promoted. She stated that young people will experiment with drugs and alcohol and many will leave that experimentation behind. However, some will develop problems and will work through those problems. However, others may find themselves in a difficult situation in terms of dependency.

In response, Mr Dunne stated that he has worked in the Trust for almost 35 years and was only within the last 3 years that he had become involved in addiction services. He stated that only while working in addiction services that he became aware of the services available and the great work carried out in terms of those services.

Ms McCallion stated that in relation to comments regarding messaging, this would be populated within the communication plan. She stated that the PHA website and social media platforms would be improved to promote messaging. She stated that it was also important to be creative and innovative in terms of trying to make contact with the hard to reach groups in relation to harm reduction messages around a range of different drugs.

She referred to comments regarding vaping among primary school children and stated that this had not been raised to the WDACT or locally to a provider to the PHA. She stated that she was keen to hear more about this, particularly when a review regarding the commissioning of services was taking place. She stated that if the life skills programme needed to include young people under the age of 11, the evidence base must be considered. She advised that if evidence was produced, they would respond accordingly.

The Chair thanked Mr Dunne and Ms McCallion for their informative presentations and for comprehensively responding to Members queries.

Mr Dessie Kyle, Manager, HURT

Mr Kyle referred to the presentation from the Western Trust and stated that he had worked with addiction and HURT for over twenty years and was unaware of the extensive range of services available provided by the Trust. He stated that this reinforced the call for more collaboration between community groups and statutory services that dealt with addiction issues.

He stated that HURT proactively supported the campaign for more detox services as part of their wraparound service so that those other facilities could support people's journeys through addiction.

He advised that HURT have been delivering intervention and support services to individuals and the family members of those impacted by addiction for twenty years and worked directly with approximately 300 clients per annum. He stated that for those in crisis, the organisation offered immediate support. However, they received no government funding from any organisations or statutory bodies.

Ms Nuala Hegarty, Northlands

Ms Hegarty presented a short video to the Committee that illustrated the work carried out by Northlands Addiction Treatment Centre. She stated that they believed there was a perception within the community that services, particularly during the coronavirus pandemic, were not available. Therefore, it was important to let people know that help was available.

She advised that Northlands offered services from information/advice to admitting approximately 60 people a year to the residential programme. She advised that pre-Covid this was a 6-week programme and facilitated up to 8 people at any one time. She stated that prior to Covid the facility was at full capacity with 62 residents in 2019. She advised that Northlands also offered a two-year aftercare programme for residents. She stated that due to Covid they have had to reduce the capacity at the facility by 50% in line with social distancing regulations. This means that only 4 residents can now be facilitated at any one time.

She stated that approximately 1,500 non-residential appointments a year were provided. However, with Covid, this has increased to 2,200.

Mr Liam Stewart, Founder, Heal the Hurt

Mr Stewart stated that Heal the Hurt had been operating for approximately 5 years as a registered charity. He advised that they have received no government funding or any assistance from other organisations. He stated that at Heal the Hurt there was no appointment required to access the service. He stated that the service was becoming stronger and was currently treating approximately 50 people per week. He stated that the families of those with addictions were significantly impacted and were powerless in trying to get their loved ones out of addiction. He stated that collectively with all the agencies, it was his understanding that there was little progress in making a way forward against addiction. He believed that education was the correct way forward and receiving the proper support and counselling. He stated that addiction was a complex issue and that there were many theories regarding recovery and that Heal the Hurt worked with the 12 steps recovery programme. He felt that this was the oldest and most successful method to date.

Continuing, he stated that the service was on a no-appointment basis as it was important to get people with addiction when they were at their most vulnerable. Therefore, he felt that being placed on a waiting list would be detrimental in terms of supporting anyone seeking help. He informed Members that he was a recovering alcoholic and drug addict for almost 28 years and stated that it was a hard way forward. He said he had also lost family members due to addiction, stating that addiction was extremely complex as there was no one person presenting themselves with one problem.

He felt that the majority of those suffering with addiction services was due to the result of trauma. He stated that he had received referrals from throughout the entire city and district and that the majority of those had an addiction to prescription drugs which must be addressed. He stated that the organisation did not receive the help that others had received as he was the sole provider of the service. However, it was hoped that another counsellor was coming on board to help as there were referrals for approximately 200 people per month. He thanked the Committee for giving him the opportunity to present at today's meeting.

The Chair concurred with the sentiments expressed by the previous speaker and stated that he had recently lost a family member in such circumstances. He congratulated Mr Stewart on his 28 years of recovery from addiction and believed that people suffering from addiction greatly respected help from people who were recovering.

He referred to Northlands and stated that he knew people who had availed of the services at that facility and congratulated them on their work. He concurred with the comments regarding the increase in prescription drug use and stated that he had witnessed this during his work as a taxi driver.

Councillor Mellon expressed her condolences to the Chair on his recent bereavement. She congratulated HURT on the approach of their 20th anniversary and for providing an excellent service throughout the city. She asked how often statutory services worked in partnership with community services and if the organisation had been approached by such services to establish the experiences of workers on the ground in relation to addiction.

She believed that education was key, knowledge was power and was aware that everyone here wanted better for their families and friends. She stated that Elected Representatives had responsibilities and roles and were living in those communities where families invested in trying to do better for people. She believed that drug testing young people would not be productive and that education and making informed decisions was the way forward.

Councillor Doyle thanked the presenters for attending the meeting. He stated that their informative and in-depth presentations had been extremely insightful.

He asked how prevalent the drug problem was in society as it was important for people to have that realisation.

Alderman Warke congratulated HURT on their 20th anniversary and commended them on their work in the community sector. He stated that the organisations were giving hope, saving lives and making a difference to people's lives. He stated that he hoped there would be more support and communication from the statutory bodies towards the community addiction services who worked tirelessly to help and support those suffering from addiction. He stated that they had the full support of Members and wished them well in their endeavours.

Councillor O'Neill thanked the representatives for their excellent presentations. She stated that the work that they carried out within the community was invaluable and was completely based on care within the community. She felt it was important to consider how to rebuild from the coronavirus pandemic and that communities should be rebuilt based on that type of care. She stated that she had previously worked within the community and voluntary sector and understood the structural disconnect between the community/voluntary sector and primary care. She queried if the representatives had much experience of that disconnect. She stated that whilst those services were invaluable within the community, they were often undervalued by funding bodies. Therefore, it was a struggle to maintain those services. She asked the representatives to outline the financial struggles faced by them and how it impacted the delivery of their services.

Councillor Ferguson referred to comments regarding prescription drug use and asked if they had seen any difference with the introduction of RAPID drug disposal bins. She concurred that communication was key and felt that it was important that links are created between community and statutory services to provide the appropriate support to those suffering from addiction. She believed that in her opinion, drug misuse within rural communities was a hidden problem and people did not talk about it, therefore it was more difficult to reach out within those areas. She queried if there was any outreach with rural community groups.

Councillor Farrell thanked the presenters for the sterling work carried out by the organisations to help people throughout the city and district. He asked the representatives to state one thing they would change to improve services.

In response, Mr Kyle stated that he wished for a one-stop shop where people who needed addiction support locally could access that support when needed without the need for a waiting list.

Ms Hegarty stated that the future focus at Northlands was to see out the commitment of the New Decade New Approach document by the Executive for funding towards a purpose built Northlands Addiction Centre in the city. She stated that it has been the vision of the founders for a considerable time.

Mr Stewart stated that he concurred with the remarks made by Mr Kyle and would have the same desire. He believed that a detox centre would be a stepping stone to saving lives, however he believed that

immediate support given to people suffering from addiction was paramount.

Councillor Farrell thanked the representatives for their informative responses. He stated that it was the Council's corporate position to have a detox facility in the city. He advised that Council had written to the Secretary of State on the matter, however no response has been received to date. He stated that the SDLP Party Leader and Foyle MP Colum Eastwood, recently pressed Secretary of State, Brandon Lewis on the matter and hoped there would be progress very quickly.

Councillor R Barr thanked the representatives for giving up their time to attend today's meeting. He believed that it was important to listen to people like Mr Stewart who used his experiences in a positive way to help others. He felt that the lack of government funding towards such groups needed to be urgently addressed. He stated that it was the responsibility of Elected Representatives to lobby for government funding towards these services.

In response, Mr Kyle referred to the query regarding statutory and community groups and stated that they had asked for closer collaborative work for several years. He felt that this was not the appropriate forum to criticise those statutory organisations, although he felt there could be more collaborative work in this regard.

Ms Hegarty advised that Northlands was a regional addiction centre that worked with the five health trusts throughout Northern Ireland. She stated that the majority of those that attended the facility were from the Western Trust area. She stated that whilst there was always room for improvement, they were working towards better referral pathways.

Mr Stewart felt that collectively everyone was doing their best but when a person was facing the horror of addiction, even on a collective basis only slow progress was being made. He stated that 41 people from his group had died due to addiction issues, the youngest being 19 and the oldest 57. He stated that those deaths had left families permanently devastated. He stated that he was passionate in his work even though he received no funding whatsoever. He stated that he wanted to help those suffering with addiction to the best of his ability. He stated that any help or guidance offered would be greatly appreciated.

The Chair thanked them for the presentations and requested a short recess at this time.

**Ms Barbara McAtamney, Head of Crime and Community Safety,
Department of Justice**

After the short recess the Chair invited Ms McAtamney to present to the Committee.

Ms McAtamney advised the Committee that the Department of Justice (DoJ) was aware that drug use was one of the key drivers in relation to crime. She stated that it could also impact on behaviours which could make people feel vulnerable and unsafe and subsequently become a potential victim. She stated that the DoJ recognised that prevention and early intervention was the preferred approach to protect people in communities as it dealt with the impact of crimes once they had taken place and that stage may be too late. She advised that the DoJ was keen to play a role both at strategic and operational level in helping to address the wider societal issues that may lead to substance harm. However, where that early intervention has not been successful or was inappropriate because of the severity or nature of the crime, it was important that the relevant agencies have the necessary powers to ensure that action was taken.

Continuing, she advised that enforcement could remove the threat to community safety and that it also provided a clear message to others of the consequences of their actions and therefore, acted as a deterrent. In relation to liaising and working with colleagues in other sectors she stated that the underpinning approach was to work collaboratively with partners to collectively identify the key issues and address those links between the drugs type behaviours and crime and to tackle the root causes of that behaviour. She advised that this also linked to the primary objective of prevention and identifying solutions to problems within communities and how to provide the help and support of services to address the needs of the most vulnerable members of those communities.

She stated that the DoH led on the new Substance Use Strategy. She stated that there was also a strong link between substance misuse and mental health issues so whilst they are separate strategies, they must be aligned with each other to provide the appropriate services at the right time. She advised that the Justice and Health Ministers were working to ensure that those needs were also being met within a custodial setting. She further advised that the DoJ had recently launched a new organised crime strategy with the overarching aim of

protecting individuals, communities and businesses from organised crime.

Continuing, she advised that on an operational level the DoJ was carrying out diversionary and recovery work. She noted that the Derry and Strabane PCSP was allocated funding from the DoJ and the Policing Board of approximately £442,000 for this funding year. She advised that the funding was used to assist the PCSP to deliver the action plan compiled by political and independent partners along with the designated organisations in that partnership. She stated that this provided project support to a number of drug and alcohol addiction initiatives with a focus on awareness, prevention and intervention.

She stated that support hubs were located throughout all of the council areas and noted that there were 61 referrals to support hubs in the Derry City and Strabane District Council area. She stated that 49 of those had been discharged this year due to their needs being met. She stated that feedback had illustrated that the service provided by the support hubs was particularly successful in dealing with individual issues.

She advised that a pilot scheme called the Substance Misuse Court was an early intervention court programme that dealt with alcohol and drugs related offending. She stated that those individuals would be given the opportunity to enter the programme to hopefully help with drugs and alcohol misuse and improve their mental health and then a reduction in offending. She advised that the programme took place before sentencing was carried out. She advised that after an evaluation had taken place, it may be rolled out to other parts of Northern Ireland.

Continuing, she stated that there were numerous people who have entered the justice system with unmet health needs and substance misuse issues and a proportion of them would be committed to prison. She advised that this year 54% of the prison population were recorded as having an addiction, with 67% stating that alcohol or drug use had contributed to their offending. She stated that for those who commit crime, the criminal justice system was an element of that process. However, a key element of any sentence must be focussed on enabling offenders to reform and be given every opportunity possible to address offending behaviour. In conclusion, she stated that the key message was that it was a multi-agency approach working in partnership with communities in an attempt to empower change and build resilience and support delivery by utilising local skills and knowledge.

William Calderwood, Chief Inspector, PSNI

Chief Inspector Calderwood stated that he was recently appointed as the new Chief Inspector and the Vulnerability Lead for the Derry and Strabane area. He stated that it was clear from the previous speakers that drugs and alcohol presented a real danger within communities. He stated that as the new Chief Inspector for the area, he wished to take the opportunity to reiterate the PSNI's commitment to arresting and charging drug dealers and suppliers. He stated that officers were focussed daily on efforts regarding those in the selling and supply of dangerous and illegal drugs. He expressed concern that there were very few areas where people had not been affected by the selling or misuse of drugs. However, he recognised the importance of working alongside other agencies to support those who were vulnerable and being exploited for criminal gain.

He stated that many of the issues encountered by the PSNI would not all be solved by a criminal justice response. Therefore, there must be a collective responsibility to ensure that those who need support can access it. At the same time, the police will continue to be robust in its actions to keep people safe. He gave assurances that the PSNI remained committed to tackling crime, making communities safer and focussing efforts on those who cause the most harm. He advised that locally this was carried out in three ways; through enforcement, problem solving and working together with partners; harm reduction and addressing vulnerability.

Continuing, he stated that the PSNI was responsible for safeguarding and protecting the public from threats and harm. He stated that drug use could drive criminal behaviour and harm in the form of exploitation, violent crime and others. He noted that in the financial year 2019-2020 there were 7,451 crimes in the Derry City and Strabane District Council area and approximately 28% of these were drug related. He stated that tackling drug misuse continued to be a priority for the area and this has been reflected in the performance figures. He stated that trauma was involved with a lot of people they came into contact with when enforcing. Therefore, it was important for police to be proportionate, fair and sensitive in any action taken.

He stated that throughout partnership working, the PSNI have been successfully able to identify threat, harm and risk and therefore could focus resources according to need. He stated that information they held was also vital to partners to ensure an understanding and address the needs of the community. He believed that it was vital to prevent drugs misuse in communities and support people dependent on drugs

through treatment and recovery. He stated that the PSNI had a local vulnerability strategy in place with an emphasis on trauma, acknowledge and response. He advised that locally, a Vulnerability Navigator has been initiated to help identify telephone contact to the police by vulnerable people. He noted that this was a new role specifically designated to this Council and one other area. He noted that 41% of calls to the PSNI were from someone who identified as having a vulnerability. He stated that the role of the Vulnerability Navigator was to look at calls to the PSNI from potential vulnerable people. He would then return those calls and have honest conversations and then signpost them to the appropriate help and support. He stated that the PSNI would do everything possible to understand the root causes of the problems of vulnerable people and work collaboratively to ensure they receive the appropriate help.

The Chair thanked the representatives for their presentations and invited comments from Members.

Councillor Doyle stated that there were people who were providing drugs and dealers who were making a profit and a living on the back of misery which must be addressed. He expressed concern regarding reports in the local press in relation to people arrested for drug related offences. He noted that those people had numerous previous convictions, which had an impact in terms of the confidence within communities that these people were not being dealt with. He also expressed concern regarding at the number of diversionary disposals being applied to repeat offenders. He noted that the rate of custodial sentence imposed at every court level from the most recent statistics from the Department of Justice was only 14.3%. He expressed concern at this low figure and he felt there was a disparity, particularly with repeat offenders, especially those involved in organised criminal operations. He felt that this was a growing concern within communities and asked if work was being done in this regard.

Continuing, he noted that the seizure of Class A drugs had steadily increased since 2006, with the number of drug offences recorded from 2018/19 being 6 times higher than 2001/02. He recognised that there was an issue that needs to be addressed on a range of areas but felt that the police needed to be doing more within the communities regarding the supply of illegal drugs. He believed that people needed to know that anyone involved in crime and organised crime will be dealt with by the criminal justice system.

He asked the Chief Inspector if there were people being used as covert human intelligence sources in Derry by the PSNI that were in the drugs trade. He stated that he asked this because there were some individuals who were seemingly untouchable in the city and district regarding the supply of drugs. He stated that this has had a devastating impact on the community and therefore felt that it was a legitimate question.

In response, Chief Inspector Calderwood advised that he was unable to address that particular question. He stated that as Inspector of District Policing Command he was responsible for providing a first class service to the community, identifying vulnerability and seeking confidence from the community. He advised that platforms such as the Policing Board would be the appropriate arena for Members to raise such concerns. He stated that as police officers they would gather evidence, identify risk and submit this to the Public Prosecution Service (PPS) to make decisions regarding prosecution.

Continuing, he advised that in respect of diversionary disposals, these were set in place to ensure that police were procedurally fair and proportionate in its actions. He further advised that diversionary disposals were only offered once to a particular individual. He stated that neighbourhood teams have increased over the past few years and they engaged with the community and addressed any issues that may be reported by local community representatives.

Councillor Ferguson stated that from speaking with the Mental Health Champion, Professor Siobhan O'Neill, she had become aware of a number of useful intensive programmes within the prison system. She asked if there were programmes available for those who returned to daily life and did not have that wraparound service once they had left the prison system. She stated that the introduction of a Vulnerability Officer within the PSNI was a fantastic initiative and asked how this was progressing.

In response, Ms McAtamney stated that there were a range of social issues which had impacted on offending which included poverty, social deprivation, mental health issues, homelessness, lack of educational attainment and employment opportunities. She stated that these factors had contributed to some re-offending, therefore it was important to establish positive connections and support to families and communities.

She advised that a number of approaches were taken to provide that wraparound service for those within a custodial setting after they have

gone through a sentencing process such as; help with accommodation and ensuring they have a safe place to live and to access opportunities for education and employment. She stated that improving the health provision within the criminal justice system was also important as a number of offenders had underlying health issues. She believed that a collaborative approach was important to ensure that the proper services were in place for those needing help in prison care.

Chief Inspector Calderwood advised that the new role of Vulnerability Navigator had been successful thus far. However, as it was a new role it was still evolving at this stage. He stated that whilst it was important for officers to be aware of the types of services available to help vulnerable people, it was also important to know what pathways were available to officers.

Councillor Mellon asked what measures were being put in place to safeguard children from criminal exploitation as reports of children supplying drugs was evident that they were victims of such exploitation.

In response, Ms McAtamney stated that the Youth Justice Agency was the key agency that worked with children. She advised of a project in conjunction with the DoJ and the DoH, Learning Together. She stated that this was a joint care and justice facility in Bangor for those who may go between the care and justice systems. She stated that consideration was given to implementing an early intervention schools programme working through the Youth Justice Agency and different partners. She stated that due to the coronavirus pandemic, there was a PSNI led group which included multi-partners to look collectively at preventing harm and identifying at risk individuals. She referred to links to social deprivation and also the increase of households experiencing food and fuel poverty. She stated that identifying young people within families who were experiencing those issues was important to offer them help and support.

Chief Inspector Calderwood stated that the welfare of young people was paramount to the PSNI as there were significant risks for the youth particularly during the coronavirus pandemic. He stated that the PSNI had rolled out a district response with partners in regards to looking after young people in the community who were deemed to be most at risk. He assured Members that the PSNI did its absolute best to protect the young people within the community from risk and harm. However, the police cannot do this alone and needed the support of partners and statutory agencies to keep our young people safe.

Councillor R Barr stated that he wished to support the comments made by Councillor Doyle, particularly in relation to his question to the Chief Inspector. He asked if a blind eye was being turned regarding the activities of drug dealers for what was deemed as the greater good.

In response, Chief Inspector Calderwood stated that the PSNI did not turn a blind eye and were robust in regards to those who created the most harm to our communities in bringing them to justice.

Ms McAtamney stated that in terms of the drug related arrests and custodial sentence issues, the judiciary within them was completely independent. She advised that the DoJ could not control what sentencing was issued to someone who comes before the court. However, she assured the Committee that there were sentencing reviews carried out on a regular basis. In regards to diversionary disposals and repeat offenders, she concurred that there were issues with this and fully understood the points made in terms of public perception. She advised of a further issue in regards to ensuring that the rule of law was seen to be upheld and to maintain public confidence in the justice system and the decisions made.

Continuing, she reiterated that sentences were made independently through the judiciary and that the reasons for those sentences may not be always made known. She believed that more had to be done in terms of the messaging regarding that process.

Alderman Hussey thanked Mr Stewart for his presentation and wished him best wishes going forward. He expressed empathy regarding the comments by Councillors Doyle and R Barr. However, he noted that these were also rural issues. He believed that a lack of confidence and perception of wrongdoers not being dealt with properly had led to an underreporting of crime. He queried how this could be improved. He stated that he lived in a border area and there was a suspicion that a lot of the drug trade was cross-border and asked if there was co-operation with An Garda Síochána in regard to this.

In response, Ms McAtamney agreed that public confidence led to increased reporting of crimes and in order to achieve increased reporting the public needed to see results. She advised that as part of numerous reviews undertaken by the criminal justice system, they were all aimed at improving that system. She stated that the DoJ had asked all councils and agencies to promote Crimestoppers, which had an anonymous number, therefore no-one could be identified. She stated that if anyone had any information about any particular crime or

information in relation to drugs, they were encouraged to report that information through Crimestoppers.

In relation to cross-border drugs trade, she stated that the key role through the organised task force was to disrupt any importation and supply and distribution of illegal drugs. She advised that in addition, the PSNI working in collaboration with the NCA were able to successfully remove a significant amount of cocaine and other drugs from entering the Northern Ireland supply. She noted that the investigation was supported by the Garda. She stated that a joint agency, cross-border task force was also in operation and also an operational task force which was established with the Fresh Start Agreement.

Chief Inspector Calderwood concurred with the comments made by Alderman Hussey and stated that it was vital that the police were accountable to the community. He stated that the PSNI worked for the community. Therefore, if it was failing them or there was a perception of failure then that would reduce confidence in policing and impact on the ability to keep people safe. He stated the matter had to be addressed. However, he reiterated if people reported crimes the police will investigate them.

In regards to cross-border communication, he stated that as Ms McAtamney had indicated, there was an organised crime task force in place. He stated that they continued to identify risk and work together to address issues and organised crime.

Councillor Mellon asked about accommodation for people who had offended and had returned back into the community. She stated that some were from outside of the area living here in temporary accommodation such as bed and breakfasts as there was insufficient suitable supported accommodation. She asked how much work was being done in association with the Northern Ireland Housing Executive (NIHE) and Housing Associations to ensure that people had access to suitable supported accommodation.

In response, Ms McAtamney stated that unfortunately, she was not close enough to the issues within prisons to give a full answer. However, she confirmed that accommodation was one of the wider wraparound services to be provided to ensure support for the person leaving prison and returning to the community.

Chief Inspector Calderwood referred to the concerns raised regarding accommodation and stated that an Inspector has been tasked to look at those issues. He stated that it was not solely a police matter and the PSNI will work with the NIHE, Environmental Health and the Courts on the matter.

Councillor Harkin stated that although drug use had significantly increased, alcohol was still the number one killer in our communities. He stated that there were major challenges faced by our communities such as addiction, domestic abuse and a range of other problems. However, the solution to these problems was not criminalisation and incarceration. He referred to comments from the Chief Inspector regarding the safeguarding for children. He advised that at a recent meeting of Council, concerns were expressed regarding the police attacking a 14 year-old autistic child in the Creggan area of the city. He stated that the police also issued fines and violated the rights of children of colour attending the Black Lives Matter protests. Council voted against any action where the police were shown to have taken advantage of people and exploiting vulnerable people, which he referred to as 'Spy Cops'. He stated that Members were not receiving honest answers from the PSNI and expressed concern that the Chief Inspector was unable to answer a key question.

Continuing, he noted that the United States had the greatest amount of drug use both prescription and other and had spent a significant amount of money on policing and incarcerating people. However, there was a realisation that the war on drugs had failed and had subsequently decriminalised the use of cannabis. He stated that in his opinion, police and legal system did not work. Therefore, resources should be put towards ending deprivation and impoverishment rather than the police service as he felt it was a failed strategy. He stated that there were real and honest debates regarding addiction taking place on a global scale. He stated that he was not reducing the seriousness of what was happening in our communities, however it was important to consider other solutions as a way forward.

In response, Ms McAtamney stated that the DoH was leading on the Substance Use Strategy advising that the consultation period had recently ended and the responses were being collated. She stated that the decriminalisation of cannabis was one of the issues being considered. However, in terms of the legislation, the legislation on drugs was a reserved matter. Therefore, Northern Ireland did not have the power to legislate on such matters in its entirety.

Alderman Hussey referred to the reporting using the 101 service and stated that it was not fit for purpose as he was unable to contact his neighbourhood sergeant.

In response, the Chief Inspector stated that the service was introduced at a nationwide level, therefore he had no control over the implementation or the working of that particular service. He stated that if there were specific frustrations regarding the 101 service he would feed those back at the proper level.

Councillor Doyle referred to accommodation for those on bail or leaving the prison system. He advised that he had attended a meeting with a range of stakeholders on the matter. He stated that he was informed by the NIHE that due to vulnerability issues and vetting procedures, if people came to the district with numerous convictions, the police had the sole authority to prevent them from residing in the area. He felt that this matter needed to be addressed.

In response, the Chief Inspector stated that the Vulnerability Inspector has investigated such issues and that the PSNI could submit objections to the court regarding the suitability of bail addresses.

The Chair thanked all the representatives for their informative and in-depth presentations and welcomed the great work being carried out to combat addiction with the voluntary and statutory agencies.

The meeting terminated at 7.35 pm