

**LONDON BOROUGH OF WALTHAM FOREST**

Committee/Date:	Cabinet – July 7th 2009
Title:	Proposal for the future use of the former St James’s Library premises for the Drug Action Team: developing open access drug treatment provision in Waltham Forest
Council Priority:	Improve community safety and reduce anti-social behaviour
Directorate:	Chief Executive
Report of:	Andrew Kilburn, Chief Executive
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Action required:	For Decision
Wards affected:	All
Appendices:	1. Project Plan - St James’s 2. Equalities Impact Assessment
Status:	Open

**1. SUMMARY**

1.1. This report seeks a Cabinet decision on whether to locate the Drugs Action Team open access drug treatment centre at 7 to 11 Coppermill Lane, the address of the former St James Street Library. If the decision is taken to locate the service at this address, Cabinet is further requested to recommend to full Council that it agree the recommendation. This is necessary in light of the Council’s decision in the 2009/10 budget meeting on 26 February 2009 to remove this item from the Council’s capital budget.

**2. RECOMMENDATION**

For Cabinet Decision

2.1. Cabinet is recommended to agree one of the following options:

2.1.1. **Option 1** - To locate an open access drug treatment service in the former St James’s Street library building at 7 to 11 Coppermill Lane: or

2.1.2. **Option 2** - To seek alternative premises elsewhere in the borough to meet the requirements of the open access drug treatment service.

- 2.2. If Option 1 is agreed, to recommend to full Council that reverse its decision on 26 February not to allocate funds to provide for the provision of the open access drugs treatment service at 7-11 Coppermill Lane.

### 3. REASON FOR DECISION

- 3.1. This is a key decision, and one reserved for Cabinet, in view of the significant public interest in this issue. Given the budget decision in February 2009, Cabinet is advised that it must obtain the agreement of Council to proceed if it agrees to locate the open access service in 7-11 Coppermill Lane.

### 4. PROPOSAL

#### History and context

- 4.1 Tackling problem drug use in the borough is a key commitment in the Sustainable Community Strategy (SCS) and increasing the number of drug users in effective treatment is one of the priorities expressed in the borough's Local Area Agreement (LAA). Introducing an open access drug treatment service into the borough to increase the range of treatment options available is necessary in order to get more drug users, and particularly crack cocaine users, into treatment and improve health and community safety for those users and the community as a whole.
- 4.2 An open access drug treatment service is one that provides treatment on demand and without the need for a prior appointment. This type of treatment programme commonly acts as a gateway into more structured treatment provision. Open access treatment provision comprises a combination of medical interventions to reduce the potential physical harm resulting from illegal drug use and psychological therapies to enhance motivation to pursue structured drug treatment.
- 4.3 The National Treatment Agency for substance misuse (NTA) is the body in England that manages the drug treatment agenda on behalf of government. The NTA has specified open access drug treatment provision as a key component of an effective drug treatment system.
- 4.4 The incidence and prevalence of illegal drug use in an area is difficult to gauge owing to the illegal and hidden nature of the behaviour. However, epidemiological studies<sup>1</sup> have been conducted nationally in recent years and these have provided estimates at borough level of the rate of problem drug use. Waltham Forest is identified in those studies as having a high rate of crack cocaine use amongst its resident population. The most recent prevalence data indicate that the rate of problem

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<sup>1</sup> Estimates of the prevalence of opiate use and/or crack cocaine use in the London Region: Glasgow University (2004/05), (2005/06) and (2006/07)

drug use in Waltham Forest is rising<sup>2</sup> in contrast to the regional picture.

- 4.5 Tackling drug misuse is a statutory duty for Councils and is a programme delivered in Waltham Forest through SafetyNet, the borough's Crime and Disorder Reduction Partnership. The Drug Action Team (DAT) commissions treatment provision and manages performance. In January 2009, the Health Care Commission published the results of a review of all DATs in England, a review that investigated the effectiveness of those bodies in commissioning provision to meet the needs of diverse communities. Waltham Forest DAT achieved a rating of *excellent*, and was rated amongst the very best partnerships in the country in terms of responding to the needs of diverse communities.
- 4.6 Publicly available performance data for 2008/09 indicate that on the key quality measure of the rate of retention of service users in effective treatment, Waltham Forest was the top-performing borough in London<sup>3</sup>. However, the number of new service users entering treatment has not increased in line with expectation, resulting in a loss of treatment funding to the borough in 2008/09, with further losses predicted in future. Furthermore, use of illegal drugs is closely associated with crime, and acquisitive crime in particular. Over the past year we have seen a significant rise in acquisitive crime rates and now rank in the bottom quartile in London on this indicator. Drug testing of those arrested for acquisitive crime in Waltham Forest indicates that a significant majority of arrestees uses crack cocaine.
- 4.7 An open access drug treatment service was specified and commissioned in 2003 by the Council in partnership with the Waltham Forest PCT, the local police command unit, and London Probation. That service was re-specified and re-tendered in 2008 and the contract awarded to Turning Point. During the past 6 years the DAT has sought to secure appropriate premises from which to deliver the service. To date this search has proved unsuccessful. Chief Officers of the Council and other partner agencies have given a commitment to government to resolve this issue.
- 4.8 The DAT identified funds to cover the cost of refurbishment of premises to accommodate an open access drug treatment service in 2005 and transferred that money from the PCT to the Council as it was agreed that the Council would lead on the project.
- 4.9 Turning Point currently provides low threshold drug treatment from offices in the Alpha Business Centre in Walthamstow. This

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<sup>2</sup> Estimates of the prevalence of opiate use and/or crack cocaine use in the London Region: Glasgow University (2006/07)

<sup>3</sup> [www.ndtms.net](http://www.ndtms.net)

central provision is supplemented with satellite provision in a number of locations in the borough. This model of provision has been in operation in the borough since 2004 as a proxy for open access provision.

- 4.10 Service users and successive providers have reported that this model comprises only a partially effective treatment offer as it cannot accommodate treatment on demand in a therapeutically conducive environment. Service users have previously indicated that they want and would use a service that was set up to deliver open access drug treatment in a drug treatment centre.
- 4.11 It is therefore imperative that a solution to the location of this essential service is found. The main options are set out below.

**Option 1 - locating provision in the former St James's library building at 7-11 Coppermill Lane:**

- 4.12 This building was brought to the attention of the DAT in February 2007 by the Council's Property Services department as it matched the DAT's specification. It is large; accessible to public transport and is centrally located, rather than hidden away, which is important for an open access service. It also has the relevant planning consent in place as libraries and clinics fall into the same planning use category.
- 4.13 A detailed feasibility study has since been carried out by the Council's Property Services department indicating that the building can be refurbished to accommodate the proposed drug service within the available DAT budget.
- 4.14 There is significant opposition to this option from local residents who want the restoration of the library or, failing that, a community facility with some form of library access point.
- 4.15 Residents have voiced serious concerns about the location of the service and the consequences of locating an open access drug service in the neighbourhood. Specifically residents have highlighted the risk of increased crime, and anti-social behaviour in the form of drug use and dealing in the vicinity. Residents also point to existing concerns about street drinking in that vicinity since the closure of the library and have expressed fears that the junction of Coppermill Lane and St James's Lane will become a "no go" area for them should a drug service be located there. Furthermore, some have expressed concerns that locating such provision in proximity to schools may constitute a safeguarding issue and contravene national guidance on the development of drug treatment provision issued by the Home Office.
- 4.16 The DAT has experience of developing both residential and other types of community based drug treatment provision in comparable locations in the borough, some of which has been in operation for more than ten years. The provision in question is

based in Walthamstow and in south Leytonstone in densely populated residential neighbourhoods and in close proximity to schools and nurseries. None has been the subject of complaint by local residents, services or businesses, nor is there evidence of any rise in crime rates as a consequence of the development of that provision.

4.17 Consultation with the Local Safeguarding Children Board manager has indicated that the introduction of community based drug treatment provision would not be likely to constitute a safeguarding risk to the community at large. The provision of effective drug treatment, however, is associated with a reduction in safeguarding risks, where they exist, to children of drug using parents.

4.18 The borough Police Commander supports this option and he has made a commitment to involving local residents in developing policing plans to address their concerns. This option is also supported by the NTA and Government Office London.

**Option 2 - seek an alternative premises solution to this issue:**

4.18.1 Between November 2003 and September 2008 successive service providers and the DAT have investigated ten possible locations in addition to the former St James's library building. None has come to fruition for a variety of reasons including:

- Commercial landlords unwilling to let
- Refurbishment of private premises uneconomical
- Being part of a series of linked development projects that did not proceed.

4.18.2 More recently residents and ward Councillors put forward two possible alternatives in the immediate vicinity. The PCT has investigated the feasibility of locating open access drug treatment provision there and concluded that neither option is viable.

4.18.3 No suitable alternative set of premises has emerged in the last six years. It is therefore far from certain that an alternative solution can be sourced. All partners are clear that accessibility of provision to this group of borough residents is of paramount importance if the project is to be successful. Any acceptable alternative is therefore likely to be neighbourhood-based and the subject of similar local concerns, and understandably so.

4.18.4 The time delay in securing alternative premises will result in further negative impact on performance in driving up numbers in treatment. This in turn will result in further loss of drug treatment funding to the borough.

## 5. ALTERNATIVES CONSIDERED

5.1 Alternatives for consideration are set out in the section above.

## 6. CONSULTATION

6.1 It is not considered that the Council is legally obliged to carry out public consultation on the location of this service at any specific premises, unless that involved the requirement for planning consent. However, a significant degree of public consultation has taken place in respect of the Council's community safety priorities and the location of the DAT service at 7-11 Coppermill Lane. During the course of the consultation about the borough's community safety priorities carried out between December 2008 and February 2009, more than 1300 residents responded and a significant majority reported that tackling drugs was one of their top priorities. This is echoed in the results of our *Place Survey*.

6.2 Further consultation with community and voluntary groups was conducted to determine support for the proposed community safety priorities. This consultation was carried out through a series of multi-agency workshops carried out in January and February 2009. As stated, key local partners in the police and NHS support the service.

6.3 Residents in the local area were consulted at the Walthamstow West Community Council on 2<sup>nd</sup> March 2009. Approximately 150 residents attended the meeting and whilst many agreed that tackling drugs was a top priority for the Council, a significant majority voiced clear opposition to locating a drug service in the former library building. This is addressed at paragraphs 4.14 to 4.18 and it is the Council's view that, without questioning the genuine nature of the views expressed that the available evidence does not support their concerns. However, there is evidence that the provision of such a service improves community safety and that failure to find any location for this service is in breach of the commitments in the statutory for crime and disorder strategy.

## 7. IMPLICATIONS

### 7.1. Financial

7.1.1 There is provision in the capital budget ring fenced for accommodation for this service.

7.1.2 There are likely indirect financial benefits when an effective open access service is provided and starts to reduce drug misuse. Drug using offenders are likely to

be responsible for up to half of all acquisitive crime<sup>4</sup>. The estimated cost to the borough of drug-related crime in the borough has been calculated using data on the economic and social costs of crime<sup>5</sup> which ascribes a monetary unit cost to particular crime types, and the prevalence of offending by drug using offenders<sup>6</sup>. The estimate arrived at is in the region of £15 million per annum (see Appendix 1).

7.1.3 Therefore, it is reasonable to say that increasing the throughput of drug users in effective treatment is likely to result in significant savings to the borough (see Appendix 1). This would be true of both options but proceeding with option 1 – an identified suitable location – is likely to bring these benefits more quickly.

7.1.4 The financial implications of proceeding with option 2 are dependent upon the length of time taken to acquire an alternative premises solution. It noted that no other suitable premises have been identified previously. In the short-term, proceeding with this option places at risk to result in a loss of drug treatment grant income to the borough by failing to increase the number of drug users entering drug treatment, which in turn impacts on the indirect benefits of providing this service identified above.

## 7.2. Legal

7.2.1 The Council has a duty to have regard to, inter alia, the need to do all that it reasonably can to prevent crime and disorder, expressly including drug and substance misuse under s.17 Crime and Disorder Act 1998, as amended. Under sections 5- 7 of the Crime and Disorder Act 1998, the Council is under a duty with other responsible authorities to develop and implement strategies to tackle crime and disorder in their area. The provision of the open access service is part of the implementation of this strategy.

7.2.2 It is considered that either option proposed is a reasonable and lawful decision on the Council's part, which takes into account all relevant factors and discounts irrelevant factors. A failure to provide the service, which has been identified by the statutory strategy, may be an unlawful position, if challenged.

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<sup>4</sup> Trends in drug use and offending: the results of the NEW-ADAM Programme 1999-2002, Home Office Research Study

<sup>5</sup> The Economic and Social Costs of Crime to Individuals and Households: 2003/04, Home Office Research Study

<sup>6</sup> Trends in drug use and offending: the results of the NEW-ADAM Programme 1999-2002, Home Office Research Study

7.2.3 The Council has power to provide these services at its property at 7-11 Coppermill Lane under s.2 Local Government Act 2000. The stated purpose of the service is to promote the economic, social or environmental well-being of the area, as set out in the priorities in the Council's Sustainable Community Strategy and identified in the report. There are not bars to the use of s.2 in this case. Moreover, the Council may also rely on s.111 Local Government Act 1972 in that the provision of the premises to provide the service facilitates the performance of the Council's duties under the 1998 Act identified above.

7.2.4 The allocation of the Council's capital programme and the exercise of the powers identified above are executive functions under Part 2 of the Local Government Act 2000. However, in light of the Council decision in February 2009, it is considered appropriate only to exercise these powers to implement option 1 (if agreed) following a Council resolution to agree to the allocation of the budget for the DAT premises.

### 7.3 Human Resources

7.3.1 No human resource implications for Council staff arise from the content of this report.

### 7.4 Health Impact Assessment

7.4.1 Users of illegal drugs are known to be at elevated risk of a number of health-related harms including the contraction of blood borne viruses (for example HIV, hepatitis b and c) and tuberculosis. They are at risk of overdose and death resulting from their drug using behaviour.

7.4.2 Drug using offenders are likely to be responsible for up to half of all acquisitive crime in the borough. Crimes such as robbery and burglary have a negative health impact on victims.

7.4.3 Use of illegal drugs is implicated in a significant minority of cases of domestic violence that come to the attention of public services. Domestic violence has a significant and negative impact upon the health of victims.

7.4.4 The DAT has set a target of getting an additional 400 more drug users into treatment every year through open access provision. If successful this expansion of numbers in treatment is likely to have a beneficial impact on those drug users and their families. It is also probably that this expansion will impact positively upon the health of the

wider community in terms of there being a reduced number of victims of acquisitive crime.

## 7.5 Equality Impact Assessment

7.5.1 Officers have conducted an equality impact assessment of introducing open access drug treatment provision (see Appendix 2). A number of equalities issues were identified by the assessment including a variance of data between those arrested for acquisitive crime that test positive for illegal drugs and those that enter drug treatment currently. In particular the cohort arrested and testing positive is significantly more likely to:

- Be a crack cocaine user
- Be male
- Be black.

7.5.2 We believe therefore that developing an effective treatment response for crack cocaine users in the borough through either option 1 or 2 will have a beneficial impact upon male and black drug users who appear to be under-represented in the treatment system. We believe it will also have a positive impact upon victimisation rates for serious acquisitive crime, domestic violence and, in time, on levels of fear of crime all of which affect BAME communities disproportionately. Both genders will benefit: men from increased access to drug treatment and women through anticipated reductions in fear of crime and victimisation rates for domestic violence. As such it is reasonable to believe that the cumulative positive equalities impact identified in the assessment is likely to outweigh any potential and immediate negative equalities impact resulting from the locating of the service in a diverse ward such as High Street.

## 7.6 Climate Change Impact Assessment

7.6.1 Officers have conducted an initial assessment of the impact of the options on climate change and have determined that there is the potential to reduce the Council's carbon footprint over time.

7.6.2 Option 1 would offer the possibility of ensuring that the former library building is refurbished to contemporary standards, incorporating such sustainable and energy saving design features as can be feasibly integrated into the programme of work within the parameters of the available budget. Traveling by workers to satellite provision will cease, or at least reduce significantly.

## 8. CONCLUSION

8.1 Waltham Forest has a demonstrably excellent DAT and drug treatment provision, but evidence suggests strongly that the current infrastructure will not support the expansion in service user numbers we need and want to see if we are to reduce the health and social harms that are a consequence of the use of illegal drugs. The success of any drug treatment development will depend upon the willingness and ability of potential users to seek help from that service and thus any development should be centrally and accessibly located. The location of drug treatment services is likely to be controversial – wherever it is in the borough - but users of illegal drugs are also members of local communities in the borough and as such require the best possible services to enable them to change their behaviour. Moreover, our practical experience is that other similar services do not in reality result in the community safety concerns identified.

### ***Background Information***

1. Estimates of the prevalence of opiate use and/or crack cocaine use in the London Region: Glasgow University (2004/05), (2005/06) and (2006/07)
2. Trends in drug use and offending: the results of the NEW-ADAM Programme 1999-2002, Home Office Research Study
3. The Economic and Social Costs of Crime to Individuals and Households 2003/04, Home Office Research Study

This report has been cleared after discussion with the Portfolio Member and Council Leader:

Signed

Date 29 June 2009

A handwritten signature in black ink, appearing to read 'P. Hill', is written below the 'Signed' text.