



# APCC FINDINGS REPORT: Deep Dive on Combating Drugs Partnerships

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A review of the experiences of Police and Crime Commissioners and police representatives in England and Wales on delivering the National Drugs Strategy via Combating Drugs Partnerships.

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# FOREWORD



## **Joy Allen, PCC for Durham and David Sidwick, PCC for Dorset Joint APCC Addictions and substance Misuse Leads**

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Police and Crime Commissioners are committed to working collaboratively with partners, including health, education and criminal justice, to reduce demand for drugs, prevent drug-use, and widen access to treatment and recovery, while delivering strong enforcement against those accountable for supplying drugs.

The government's 10-year national drugs strategy 'From Harm to Hope', and the introduction of Combating Drugs Partnerships (CDPs), are a step in the right direction for fulfilling these objectives.

As the Senior Responsible Owners (SROs) of our respective CDPs, we have a strong awareness of the crucial role that these partnerships play in delivering significant outcomes.

We are therefore keen to use our roles, as the APCC leads for Addictions and Substance Misuse, to represent the needs of PCCs and to support the performance of their local CDPs by highlighting areas of best practice and of improvement, which can be used for future learning.

This deep dive review seeks to capture the views and experiences of PCCs and policing partners who are the SROs of CDPs (and their equivalent in Wales), or who are involved in the work of their local CDPs, with the aim of shedding light on achievements so far, in addition to exposing challenges faced by local delivery partners.

# BACKGROUND INFORMATION

- **106 Combating Drugs Partnerships (CDPs)** have been established across England.<sup>1</sup>
- **Around 70% of Senior Responsible Owners (SROs) are Directors of Public Health**, alongside other role holders (PCCs, Community Safety leads, Police Staff etc).<sup>2</sup>
- There are a total of **12 PCCs/Deputy PCCs/Deputy Mayors**, and **2 police officers** who are SROs.<sup>3</sup>
- **Around 50% of Police Force Areas (PFAs) in England** have a single partnership.

This report seeks to inform the APCC drugs leads, the Joint Combating Drugs Unit (JCDU), and the Inter-Ministerial Forum, on the role and experiences of PCCs and policing partners involved in their local CDPs, with the aim of supporting the wider delivery of the 10-year drugs strategy.

It does this by providing an overview of common themes and trends identified in the experiences reported by PCCs and police officers, through the use of case examples and by including ‘key questions’ that the APCC believes should be further explored moving forward.

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<sup>1</sup> **From harm to hope: A 10-year drugs plan to cut crime and save lives** - [From harm to hope: A 10-year drugs plan to cut crime and save lives - GOV.UK \(www.gov.uk\)](#)

<sup>2</sup> **From harm to hope: First Annual Report 2022-23** - [From harm to hope: a 10-year drugs plan to cut crime and save lives - First Annual Report 2022-23 \(publishing.service.gov.uk\)](#)

<sup>3</sup> **Appendix A: Map of PFAs** where PCC/police staff are the SRO of CDPs

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# METHODOLOGY

The review adopted a mixed-method model of research for the data collection process. **This included:**

- Desk-based research of existing CDPs' Self-Assessments and Local Annual Treatment and Recovery Plans.
- Survey to all PCCs in England & Wales and to all Police representatives who are the SRO / Co-SRO of CDPs.
- Semi-structured Focus Group Interview with PCCs who are the SROs of their local CDPs (or work closely in partnership with the SRO).
- Attending CDP meetings.
- Attending the London Drugs Forum and the Combating Drugs Partnerships Senior Responsible Officer Event hosted by the Mayor's Office for Policing and Crime (MOPAC).
- OPCC site visits.

Data from a total of **39 Police Force Areas** was collected.

## Review Advisory Group

As part of the deep dive, the APCC also established a Review Advisory Group to ensure a balanced approach and to harness the knowledge and expertise of key partners from the following government departments and organisations:

- Joint Combating Drugs Unit
- Department of Health and Social Care
- Dorset OPCC
- Durham OPCC
- National Police Chiefs Council
- Association for Directors of Public Health

The APCC encourages and welcomes feedback on all resources. Any comments or issues with contact can be directed to [enquires@apccs.police.uk](mailto:enquires@apccs.police.uk)

# EXECUTIVE SUMMARY

## Representation and Involvement

Overall, PCCs and police partners have reported that they are effectively **represented** at CDP level. PCCs in Wales also reported a good level of representation in local Area Planning Boards (CDP equivalent).

The **involvement** of PCCs and of the police in local CDPs varies across PFAs, however. PCCs and police representatives have reported different experiences with regard to their role in the workings of CDPs and in the wider delivery of the national drugs strategy.

This was found to be dependent on a number of factors and challenges, including the number of CDPs within PFAs / the geographical footprint of CDPs, existing working relationships and partnerships with local delivery partners, capacity, resources and funding.

Findings show that there is no 'one-size-fits-all' solution or governance model to address these issues as local context and variations require for a tailored approach. PCCs in Wales also reported similar challenges in their local APBs.

## Value and Influence

Nonetheless, there was consensus on the value that PCCs and police representatives bring to their local CDPs.

**This can be seen to be largely a result of the following attributes of PCCs:**

- Their statutory powers and responsibilities - e.g., holding the police to account; convening partners; commissioning services etc.
- Their footprints across PFAs
- Their ability to promote a whole-system approach
- Their role as independent and publicly elected officials
- Their leadership and national influence.

**Similarly, police representatives were found to provide significant contribution and influence by:**

- Providing Strategic Direction

- Providing operational insight
- Strengthening existing working relationships
- Providing data and intelligence.

## Strategy and Delivery

The majority of PCCs and police representatives reported that Police and Crime Plans inform the work of CDPs to some level. Views on whether this is dependent on the involvement of a policing authority within the CDPs were almost evenly split, with half of the respondents who engaged in the research stating that PCC and visibility is highly important, whilst the other half noting that this does not affect the extent to which Police and Crime Plans are taken into consideration.

The role of the national drugs strategy and of central funding in being key drivers and factors that shape CDP delivery was acknowledged by the majority of respondents.

The situation in Wales diverges somewhat from that in England however, since APBs were in place before the introduction of the Harm to Hope strategy, meaning that Police and Crime Plans were already being considered by the APBs.

Similarly to Police and Crime plans, it was found that the extent that local drugs strategies developed by police forces impact the action plan of CDPs is dependent on how closely they align with the aims and objectives of the national drugs strategy, and on whether drugs is a local priority for the police force per se. That said, there is agreement that the police forces' drugs market profiles and needs assessments considerably link-in with the action plans of CDPs on the basis that these are data-driven documents.

The activities of CDPs were also noted to be shaped and influenced by a number of other existing key police strategies and profiles - (e.g., for areas covering knife crime, gang violence, Serious Organised Crime etc).

## Key Questions

**The research highlights a number of questions for national policy and decision makers about how they develop support for local implementation:**

1. How can we support CDPs to tailor their local governance structures to address local challenges and adapt to local contexts?

2. How can we support PCCs and policing partners to ensure that their future involvement in CDPs is not curbed due to pressing demands from other priorities?
3. What further support could be provided to, and input sought, from Wales to ensure that the work of APBs to deliver the outcomes of the 10-year drugs strategy and of the Welsh Government's Substance Misuse Delivery Plan is supported and synthesised?
4. How can the opportunities of CDPs to influence where the funding is allocated be enhanced (particularly in areas such as prevention, early intervention and alcohol)?
5. How can data-sharing between local delivery partners and access to key data by all members be improved?
6. How can PCCs, CDPs and the JCDU, effectively engage ahead of future political developments (i.e., PCC and government elections)?

# KEY FINDINGS

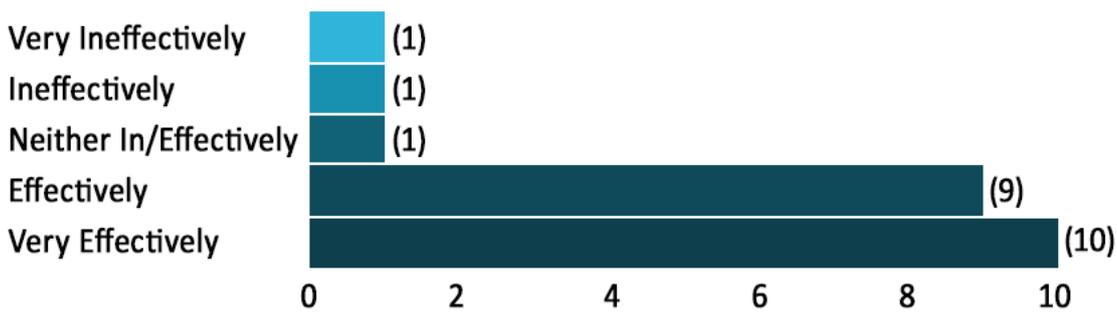
## Involvement and Representation

### PCCs & Police Officers (England)

There are a total of **12 PCCs/Deputy PCCs/Deputy Mayors** and **2 Police staff** who are SROs across England.<sup>4</sup>

Where the SRO is not a policing authority, the majority of PCCs and police officers in England who engaged in the survey (**19 out of 22 responses**) reported that they are effectively/very effectively represented at CDP level.

**How effectively are PCCs/Police Staff represented when the SRO of the CDP is not a policing authority?**



By contrast, the level of direct involvement of PCCs and police representatives within their local CDPs were found to vary considerably across PFAs and across CDPs.<sup>5</sup>

<sup>4</sup> **Ibid.**,

<sup>5</sup> **Appendix B** - Table of PCC and Police level of involvement in their local CDPs.

## Factors that impact PCC and police involvement in CDPs (APBs – Wales)

While the involvement of policing authorities was found to be primarily dependant on whether drugs policy is a local policing priority – overall, PCCs and police officers have demonstrated a strong resolve to participate in the work of their local CDPs.

**That said, a number of key factors have been identified as having a significant impact on their ability to fully engage with CDP activities - namely:**

### Geography

The geographical footprint of CDPs was found to considerably affect the level of involvement of PCCs and police representatives in their local partnerships. For instance, CDPs that operate at a PFA-level with coterminous boundaries with Integrated Care Boards, and which coincide geographically with other existing working partnerships (such as Community Safety Partnerships), found that this facilitates the administration of CDPs, providing a natural and existing structure for partnership working within the area.

By comparison, in instances where there are multiple CDPs tied to Local Authority areas that sit within wider PFAs, PCCs (and other partners, including police, Fire, Probation etc) are required to attend multiple separate meetings. The discrete operation of CDPs in these cases can be problematic for the involvement of PCCs and police officers, limiting their ability to respectively input into and receive feedback from each CDP in a consistent manner. This was reported to be particularly the case where CDPs operate at a district level.

### Capacity and Local priorities

Limited capacity and resources have been referenced, by both PCCs and police officers, as a key barrier that narrow their opportunity for involvement. More specifically, the time commitment and workload that stems from their involvement within CDPs was found to be onerous for some.

As referenced above, this challenge was found to often present itself in PFAs with multiple CDPs, where PCCs and police officers are required to allocate their time across numerous partnership meetings - or send representatives, thus burdening their staff resources. In some cases, PCCs have reported that this undermines their ability to be effectively sighted on the partnerships' progress and activities, in addition to posing difficulties in managing local delivery partners' expectations around their involvement.

In fact, attendance by senior partners was flagged to be an issue more broadly, with key accountable officers from all relevant sectors frequently sending delegates and substitutes to

represent their interests. This was reported to hinder the effectiveness and timeliness of formal decision-making at CDP meetings significantly. More widely, the bureaucratic burden placed on members/SROs, who are required to report continuously to central government on activities carried out by their CDPs and on performance, was also referenced as a significant demand on limited capacity, given a lack of funding to support this activity.

While these problems may be most acute in PFAs with multiple CDPs, even in PFAs where there is a single CDP and the PCC is the SRO, it was noted that the additional work undertaken by OPCCs and by police colleagues to support the delivery of the objectives of national drugs strategy has created further capacity challenges; reflecting how the added requirements and expectations resulting from the introduction of CDPs affects, to varying extents, all PCCs and their forces, regardless of the governance structure models that have been adopted.

Limited capacity was also found to negatively affect contribution of policing authorities in CDPs when PCCs or police officers need to dedicate their time and resources to other emerging priorities - e.g., when bid opportunities or focused work prevents full commitment to CDP work. For police officers, this is particularly contingent on operational duties and demands.

**KEY QUESTION:** How can we support PCCs and policing partners to ensure that their future involvement in CDPs is not curbed due to pressing demands from other priorities?

## Funding

A significant number of PCCs said that the effects of limited capacity and resources are further aggravated by the lack of readily accessible funding to support their involvement, with funding flowing directly to Local Authorities. As a result, PCCs are unable to rely on the Supplemental Substance Misuse Treatment and Recovery Grant (SSMTRG) to support their functions and duties, and they do not have any other dedicated resources to sustain their positions as SROs, and their participations in their local CDPs more broadly.

In some cases, PCCs suggested that this funding model encourages 'silo' working and weakens the influence of PCCs. For example, whilst the SSMTRG process requires PCC sign-off, several PCCs found that there is inadequate time to scrutinise plans and noted that this stage of the process is not mandatory, thus diminishing their ability to input. A tendency to 'silo' working was also found to reduce the ability of PCCs to translate policing priorities into tangible partnership activity, as their ability to influence is reduced as a consequence of the smaller LA boundaries and the localised nature of the work of CDPs.

## Comparative Examples

The structures and governance models adopted by CDPs to manage the issues outlined above vary across force areas, reflecting variations in local settings and of existing working relationships between local delivery partners - in addition to wider contextual factors, such as the requirement for some areas to harmonise the formation of CDPs with changes triggered by Local Government Reform.<sup>6</sup>

Below are some examples that display different ways in which CDPs operate in instances where the SRO is not (exclusively) a policing authority, yet the 'very effective' representation of PCCs and police force was reported.

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<sup>6</sup> (e.g., Cumbria shifted from 1 county and 6 districts to two unitary authorities, with two Directors of Public Health).

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### CASE EXAMPLE: West Yorkshire PFA

#### Deputy Mayor is the SRO:

West Yorkshire's PFA covers an area of 770 square miles and has five CDPs covering its Local Authority districts. The oversight of these partnerships consists of a central SRO operating at West Yorkshire level. This provides the freedom and flexibility for district areas to capitalise on existing structures and well-established ways of working within a shared West Yorkshire framework.

This model encourages CDP partners to come together to address common and emerging issues. These have included the use of Naloxone; a West Yorkshire approach to nitrous oxide; and the streamlining of treatment pathways for recipients of Drug Rehabilitation Requirements or Alcohol Treatment Requirements at court.

In addition, the Deputy Mayor's role as the Chair of the West Yorkshire Strategic Combating Drugs Board helps foster collaborative working across local boundaries and gives the Deputy Mayor the opportunity to use their position to influence and support leaders at partnership organisations to deliver the best outcomes for residents.

### CASE EXAMPLE: Surrey PFA

#### PCC has a strong working relationship with the SRO:

Surrey's PFA covers an area of 642 square miles and has a single CDP which covers the whole of Surrey, despite it being made up of one unitary authority (Surrey County Council) and 11 district and borough councils. The PCC has operated alongside Public Health colleagues and other

stakeholders for many years and a similar Board for Drugs & Alcohol was in place in the county before CDPs were introduced. Whilst the PCC does not hold a formal position of leadership within the CDP (i.e., Co-SRO, Chair etc), the long standing and positive relationship that they have with the current SRO, who is a Director of Public Health, gives them the space to have a high level of involvement and impact on the activities of the CDP, emphasising the importance of strong and trusted relationships between local delivery partners for ensuring effective representation and engagement.

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## **CASE EXAMPLE: Merseyside PFA**

### **PCC leads a regional senior operational CDP:**

Merseyside's PFA covers an area of 250 square miles and has five CDPs (in each of the boroughs), with all SROs being Directors of Public Health. The CDPs feed into a regional senior operational CDP and the Merseyside Policing and Partnership Board. Quarterly updates are produced for each local area, and each CDP is required to provide detailed local data and reports at the regional operational group, as well as a combined regional report to the Merseyside Strategic Policing and Partnership Board - both of which ensure oversight and assurance on performance.

Both the PCC and the Deputy PCC lead at a regional level and promote joint delivery across CDPs and innovative partnership working. Their attendance at the senior operational forum and the Merseyside Strategic Policing and Partnership Board ensures that the agendas and delivery plans of the CDPs are integrated into other areas of work across the Criminal Justice System.

The tiered structure was agreed with partners as the most efficient way for the implementation of the SRO process and to ensure oversight and accountability by the PCC, without placing the need for the PCC to attend individual meetings for each CDP.

## **CASE EXAMPLE: Northumbria PFA**

### **PCC Chairs CDP meetings:**

Northumbria's PFA covers an area of 2,000 square miles and has a single CDP. The PCC for Northumbria is not the SRO but Chairs the CDP meetings. This was a conscious decision to maximise both the impact of the SRO (who currently holds the position of Director of Public Health – and who is also the national lead for drugs and alcohol for the Association of Directors of Public Health) - and the PCC, allowing them to both drive the agenda forward in their respective roles, as well as provide effective challenge both locally and nationally.

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## Considerations

PCCs, police officers, and other relevant local delivery partners, have demonstrated considerable adaptability and resilience in their use of existing frameworks, geographical footprints, knowledge, and working relationships, to facilitate engagement with their local CDPs. Nonetheless, competing boundaries, diverging needs, increasing demands, and differing funding arrangements at a Local Authority level, remain a challenge for many areas - with notable variations in how this is addressed across England and Wales and limited evidence of impact to date on which CDP model may be considered 'best practice'.

### CASE EXAMPLE: Devon and Cornwall PFA

For example, while a number of PCCs have found setting-up overarching groups at a PFA-level to be a successful method for bringing together the work of CDPs across a larger geographic footprint, this approach has not proven fruitful for all PCCs. For example, the PCC for Devon and Cornwall has established a Strategic Peninsular Drugs & Alcohol Partnership which meets 4 times a year and serves as a forum where the PCC may receive updates from each of the CDPs. It is the intention of the Strategic Partnership to influence the business of CDPs by convening all SROs, which is a necessary additional governance structure due to the number of CDPs in the geographical area. However, in practice, this model has been reported to have experienced challenges as some SROs delegate attendance and local policing representatives at the CDPs do not report directly into the Strategic Peninsular Drugs & Alcohol Partnership. These challenges have demonstrated the potential disconnect between the partnership forum chaired by the PCC and local activity in areas with multiple CDPs.

On the whole, there is a need to balance PCCs' appreciation of the importance and value of adopting a local (bottom-up) approach, which enables delivery partners to address local issues and meet local needs - and PCCs' recognition that localised working within LA boundaries has limits that can prevent action from taking place at a PFA level, where this would be more efficient and effective (top-down approach).

Based on the responses provided by PCCs and police officers, there does not appear to be a 'one-size-fits-all' approach or model to ensuring effective collaboration, and it is therefore essential for CDPs to continuously and dynamically assess their local structures and terms of reference to ensure that they are fit for purpose.

**KEY QUESTION:** How can we support CDPs to tailor their local governance structures to address local challenges and adapt to local contexts?

## Police and Crime Commissioners (Wales)

In Wales, the statutory responsibility for formulating and implementing a local strategy for combating substance misuse in each local government area rests with the responsible authorities for that area, which form the Community Safety Partnerships (CSPs).

The Substance Misuse Area Planning Board (APB) structure was established to support delivery of the Welsh Government’s Substance Misuse Strategy (2008 – 2018)<sup>7</sup> - (updated in 2019)<sup>8</sup> - and to plan treatment services and pool resources at a regional (Local Health Board) level.<sup>9</sup> The membership of the APBs includes representatives from all the responsible authorities to enable statutory responsibilities in respect of substance misuse to be discharged at a regional level and has a similar membership to CDPs - i.e., (Directors of Public Health, Police service, Probation, Local Authorities etc).

<sup>7</sup> **Substance Misuse Strategy for Wales 2008-2018:** [the-substance-misuse-strategy-for-wales-2008-2018.pdf \(gov.wales\)](#)

<sup>8</sup> **Substance Misuse Delivery Plan 2019-2022:** [substance-misuse-delivery-plan-2019-22.pdf \(gov.wales\)](#)

<sup>9</sup> **Guidance for APBs:** [Revised-guidance-for-substance-misuse-area-planning-boards-2017.pdf \(gov.wales\)](#)

As shown by the table below, policing authorities report that they are effectively represented in APBs, especially when the PCC is responsible for co-chairing the meetings and where there is a single Board within the PFA:

Police Force Area (PFA)	Number of APBs in PFA	PCC/Police Representation at APBs	Chair/ Co-chair of APB	Chair/ Co-chair of Sub-group(s)	Attend APB meetings & are a Voting Member	Attend APB meetings but are not a Voting Member	Attend APB Sub-group meetings
South Wales	3	Effectively			Yes		
North Wales	1	Very Effectively		Yes	Yes		
Dyfed-Powys	2	Effectively			Yes		Yes

PCCs and policing representatives in Wales also highlighted that the introduction of the government's 10-year drugs strategy only affected the nature and workings of their local APBs to a little/some extent. This was attributed to the fact that the inclusion of policing and Criminal Justice elements of substance misuse was already on the agenda in Wales as it formed part of the Welsh Government's plan (which was updated in 2019).

It was also noted that the full integration of the objectives of the From Harm to Hope strategy can be difficult since only parts are applicable to Wales, and funding for devolved partners has been limited compared to England. Partly as a result, the APBs predominately work to the Welsh Government Substance Misuse delivery plan, Frameworks and Guidance, Core Standards and Key Performance Indicators (monitored through the Welsh National Database for Substance Misuse, plus localised performance indicators). However, the over-arching commitment to reducing drug use and drug related crime, harms, death, is in line with the UK Government's 10-year drugs strategy, with a focus on a recovery-orientated system.

The factors that affect the involvement of PCCs in APBs are largely similar to those affecting policing representatives in England – i.e., geography, variance of local needs, diverging modus operandi across the Boards, the number of APBs within the Force area, and the effectiveness of the working relationships between local delivery partners.

**KEY QUESTION:** What further support could be provided to, and input sought from Wales, to ensure that the work of APBs to deliver the outcomes of the 10-year drugs strategy and of the Welsh Government's Substance Misuse Delivery Plan is supported and synthesised?

## Value and Influence

### Police and Crime Commissioners (England & Wales)

While the level of direct involvement of PCCs and police officers in CDPs is variable across PFAs, there was consensus on the value that PCCs add to CDPs, and the support they provide for driving the delivery of the national drugs strategy's outcomes. Below is an overview of key benefits of PCC and police involvement to CDPs:

#### Whole-System and Holistic Approach

Numerous PCCs reported that their involvement helps local CDPs link-in with wider initiatives and resources within Policing and the Criminal Justice System, helping to ensure a more proactive police

response to drug-related issues, in addition to encouraging greater focus on Criminal Justice cohorts within the scope and delivery plans of CDPs.

### **CASE EXAMPLE: Humberside PFA**

The PCC for Humberside proactively ensures that CDPs are engaging with Criminal Justice priorities, such as Court Disposals and a Whole System Approach for female offenders. For example, the PCC ensured that this was a subgroup priority in one of the CDPs within their PFA by connecting the CDP with their scrutiny panel for Out of Court Disposals.

PCC's strong ties to policing and the Criminal Justice System also enable them to identify gaps within the local delivery which may be less a focus for other partners given their responsibilities (e.g., the need for a generational shift in demand for drugs), this can help to focus more attention on prevention and early intervention, alongside treatment and recovery, which may be the key issue for health.

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### **CASE EXAMPLE: South Wales**

The work of the APBs in South Wales has greatly benefitted from Western Bay being a Project ADDER delivery site. This has allowed delivery partners to test innovative new approaches to tackling drug-related harms and to increase treatment service capacity. As the grant holder, the PCC has worked closely with colleagues in the force, APBs, and HM Prison and Probation Service (HMPPS), to ensure the effective use of the ADDER funding. In addition, the PCC has contributed to the Kantar independent evaluation and has shared best practice from the Project ADDER Programme Board and information with the Project ADDER Knowledge Hub with APB colleagues.

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### **CASE EXAMPLE: Dorset PFA**

As part of the activities carried out by the Dorset CDP's prevention sub-group, Dorset is one of just five areas to receive funding through Phase 1 of the National Institute for Health and Care Research (NIHR) Innovation Fund to reduce demand for illicit substances in a study to research and develop interventions with young people that can be tested locally. The pilot seeks to test the impact of upskilling Dorset's workforce in the delivery of personal and social skills interventions, combined with a targeted social marketing communication campaign to change attitudes to substance misuse. The CDP, via the PCC (who is also the SRO), has provided bridging funding for the work to continue between the conclusion of the Phase 1 project and the outcome of application to Phase 2. Dorset Council has applied, on behalf of the CDP, for further funding in Phase 2 to deliver and

evaluate interventions over a 12-month period. Phase 3 applications will be invited to scale up the local interventions to a national level.

This project is funded by the National Institute for Health and Care Research (NIHR) under the Innovation Fund to Reduce Demand for Illicit Substances (RDIS) (Grant Reference Number NIHR205269).<sup>10</sup>

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<sup>10</sup> The views expressed are those of the author(s) and not necessarily those of the NIHR or the Department of Health and Social Care.

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This is a clear example of how the involvement of PCCs in CDPs enables the leverage of funding to Criminal Justice associated drug and alcohol issues. However, there is still a concern that the ‘reducing demand’ pillar is not supported by sufficient dedicated national funding, which has constrained delivery and has reduced the overall focus and attention that partners are able to give to key areas, such as prevention. This can also affect CDPs’ ability to address some of the root causes of drug use, such as mental health problems and social exclusion, which require collaboration that extends beyond healthcare and law enforcement (e.g., education).

In addition, the lack of sustainable ADDER funding for policing (where it was reported that budgets are reducing, despite growing expectations around delivery) - as well as a lack of long-term funding and certainty beyond March 2025 - were noted to be inhibiting the ability of partners to deliver the objective of the 10-year drugs strategy and sustain the real momentum that they have built to date.

**KEY QUESTION:** How can the opportunities of CDPs to influence where funding is allocated be enhanced (particularly in areas such as prevention, early intervention and alcohol)?

As part of their duty to be the voice of the people, PCCs are also an important avenue for the representation of those with lived experiences within their local communities, including those affected by drug-related crime and other harms, highlighting the real-life impacts of illegal drugs, as well as often supporting service user voice and involvement.

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## **CASE EXAMPLE: Durham PFA**

Durham’s CDP has developed a strategic framework for the voice of those with lived experiences. It adopts a wide definition of ‘lived experience’ to represent not only the experiences of individuals in recovery, but also of those with lived experience as family members or of drug-related crime and anti-social behaviour in their communities. The Durham’s PCC is the SRO of the CDP and has the

contacts and knowledge to be able to recruit and incorporate lived experience champions with a wide range of experiences of drugs and their impact.

The involvement of PCCs in existing partnerships relating to policing and Criminal Justice was also found to play a significant role in strengthening collaborative-working by bringing learning from other multi-agency partnerships and providing opportunities to engage with different groups of stakeholders beyond the membership of CDPs.

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## CASE EXAMPLE: Bedfordshire PFA

For example, the OPCC for Bedfordshire, together with Police colleagues, lead and/or are represented at multiple subgroups that are governed by the CDP, including: <sup>11</sup>.

- Bedfordshire's Police Serious Violence Board (Chaired by the police)
- Serious Violence Duty Board (Chaired by OPCC as conveners of the duty)
- Male Violence against Women and Girls Board (Chaired by the police)
- Organised Crime Group and County Lines Partnership Board (Chaired by the police)
- Data and Intelligence Group for Violence and Exploitation Reduction in Bedfordshire (Chaired by the police)
- Community Safety Partnerships (Luton, Bedford & Central Beds are chaired by LA leads, attended by the police and OPCC colleagues)
- Reducing Reoffending Board (Chaired by Bedfordshire Probation)

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<sup>11</sup> In Bedfordshire, the scope of the CDP has been expanded, and renamed the Bedfordshire Serious Harm Partnership Board.

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### **This added value is further enhanced by PCCs' significant statutory responsibilities around partnership working - For example:**

- PCCs bring community safety partners from police, fire, health and local authorities together e.g., Community Safety Partnerships.
- The majority of PCCs chair their Local Criminal Justice Boards (LCJB), which include police, prison, courts, probation and third sector representatives.
- Under the Serious Violence Duty, PCCs have a key role in supporting delivery as a lead convener for local partner agencies – e.g., Justice partners, Education, Health etc.

The convening powers held by PCCs were believed, by many respondents, to be crucial in integrating existing structures and governance systems across the PFA to support the work of local CDPs, whilst also guaranteeing that there is an appropriate balance of health, community safety, and crime reduction within discussions and planning at a CDP level. This is key for a holistic approach as it ensures that the activities and focus of CDPs do not lean towards one area of the drug strategy (e.g., treatment) at the expense of another (e.g., enforcement).

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## **CASE EXAMPLE: Norfolk PFA**

Norfolk's PCC has formalised collaborative arrangements and integrated governance and programme management between the Serious Violence Duty (SVD) partnership and Norfolk's CDP, forming a SVD/CDP Programme Group. This integrated collaborative approach presents numerous opportunities for both partnerships to share resources and expertise and reduces the risk of duplication and/ or conflicting activities, while providing scope for exploring opportunities for joint deliverables.

## **Commissioning**

Section 143 of the Anti-social Behaviour, Crime and Policing Act 2014 provides PCCs with powers to provide or commission services.

This gives PCCs the authority within CDPs to raise awareness and ensure linkage with PCC Commissioned and Co-commissioned services in other areas, which maximises funding opportunities and value for money.

## **CASE EXAMPLE: South Yorkshire PFA**

South Yorkshire's OPCC reported that PCC involvement within CDPs provides a whole-system view of commissioning activities given their knowledge of the range of opportunities and of services that are being commissioned across the PFA. For example, they have been able to support the delivery of their CDPs' objectives by linking initiatives commissioned by their Violence Reduction Unit to tackling drug-use in their area (e.g., knife crime).

The commissioning knowledge and experience of PCCs was also seen to have a role in supporting partners, such as drug treatment commissioners, to develop effective governance arrangements for projects and initiatives, ensuring that the right stakeholders are engaged. Some PCCs also reported sharing good practice across commissioning organisations and helping partners develop bids for external funding.

PCCs can also bridge funding gaps for areas that are not funded under the 10-years drugs strategy via the PCCs budget, particularly within the enforcement and Criminal Justice arenas. For example, by ensuring that PCCs' broader commissioning compliments, where possible, diversionary and prevention activities.

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## **Police Force Area Footprint**

PCCs cover and have oversight of a larger footprint (PFA) than Local Authority (LA) Areas, helping to address the wider causes and contexts for the impact and harms of drugs and alcohol on communities, and to reduce inequalities and address wider social determinants, which will often require and benefit from a co-ordinated, strategic approach across the PFA area.

Focused delivery in smaller LA areas can result in inconsistent delivery across different CDPs. The involvement of PCCs provides an element of consistency and commonality for those agencies that cover a wider footprint and strengthened the local delivery partners' ability to be linked into the wider strategic landscape around substance use. In particular, where there are multiple CDPs across a PFA, PCCs have reported sharing best practice in order to manage the performance of CDPs in instances where some are more advanced than others and are delivering more efficiently - ensuring that the partnerships that fall within their PFA's are learning from one another's experiences, strengths and weaknesses.

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## **CASE EXAMPLE: Lancashire PFA**

The Deputy PCC for Lancashire has brought the three CDPs within its PFA together under the 'Pan Lancashire Drug and Alcohol Alliance'. The Alliance aims to create a forum to communicate best practice, share learning and identify opportunities for the three partnerships to collaboratively address and tackle substance misuse across Lancashire. The first alliance summit showcased the need for a multi-agency campaign focussing on Drug Driving and, as a result of this, the OPCC worked closely with the alliance to develop a Dangerous Driving Campaign which was launched in late November 2023 ahead of the festive season.

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## **CASE EXAMPLE: MOPAC, London**

The London Drugs Forum is a strong example of the ability of PCCs / Deputy Mayors to use their wider position to lead and convene within the spheres of policing and Criminal Justice to progress the work of CDPs, even when they do not hold the role of SRO directly. Jointly chaired by the Deputy Mayor for Policing and Crime and the Mayor's Senior Health Advisor, this pan-London

forum is a multi-agency partnership bringing together Criminal Justice and health agencies to develop an effective response to drug related harms and crimes across the city. Representation includes both health and Criminal Justice partners, and the forum was found to effectively encourage discussions around the delivery plans of the 30 CDPs across London and their role within a Greater London context. It is due to this high number of CDPs that the decision was taken (in conjunction with the Joint Combating Drugs Unit) that it would not be practical for the PCC not to be the SRO of each one. For example, in previous Forum meetings members have discussed how to best coordinate where there are similar needs, and actions were taken for the secretariat to work with GLA Public Health Unit, the Office for Health Improvement and Disparities (OHID), and JCDU colleagues to explore this in more detail.

The forum also serves to provide a link to project ADDER areas and ensure that local delivery partners take into consideration the Metropolitan Police Service (MET) Drugs Strategy. The Forum has also led on convening London's Coroners to discuss greater sharing of data and has worked with OHID and the MET to increase vetting for drugs workers to aid with diversion and referral activity in custody, all of which will benefit the work of CDPs.

## **Leadership and Independence**

PCCs' ability to harmonise the work of CDPs stems largely from their positions as elected officials, which gives a greater element of public accountability to the work of CDPs. In particular, with funding streams flowing through local authorities, it was noted that the involvement of an independent figure who can offer strategic, policy and commissioning, oversight is important for balance and accountability. For example, PCCs are seen to be in a position to request for updates and details from OHID on the additional funding provided to Public Health to deliver the treatment strand of the strategy.

PCCs, and senior policing representatives, were also seen as a strong point of contact due to their high-profile and status within the community, which gives greater visibility and clarity for partners who wish to engage and collaborate with the CDP. By comparison other agencies (such as Integrated Care Boards), were believed to be less well defined and understood by partners and the public.

In some instances, PCCs were described as an 'honest broker' within and across CDPs, owing to the democratic legitimacy and the statutory responsibilities that they have for scrutinising and holding partners to account, whilst maintaining their independence and neutrality. This enables PCCs to challenge partners around performance and to set out expectations, particularly with regard to the 'breaking drug supply' strand of the strategy.

## National voice

The role of PCCs within the wider political landscape was also reported to enable them to influence national drugs policy on behalf of their CDPs, as they hold a strong position as democratically elected representatives of their communities, which enables them to provide challenge to national leaders and to feed communication back to central government on the work of their CDPs. This was seen as an important attribute because sustaining political and public support for combating drugs initiatives was reported to have its challenges, especially in the face of competing priorities and budgetary constraints.

### CASE EXAMPLE: APCC

For instance, the APCC portfolio leads for Addictions and Substance Misuse play a significant role in advancing and promoting the interests of CDPs by maintaining frequent communication with government departments (including the Joint Combating Drugs Unit) and feeding back ongoing work and experiences via the Inter-Ministerial Forum. The APCC leads also more widely support the work of CDPs via the 'APCC SRO Forum', a bi-monthly meeting aimed at supporting PCCs and police officers who are the SROs or who are involved in their local CDPs, (and colleagues with a similar role in Wales), to engage with Ministers and senior officials across government who are driving the delivery of the Drug Strategy. This also provides the opportunity for PCCs and police representatives to be briefed on any relevant national guidance, policy documents, and wider national events, which they can then report back to their CDP/APB members.

The strong link provided by PCCs between local delivery partners and government has ensured that there is awareness of key local priorities and issues at a national policy level - the APCC's leads work in supporting the ban of nitrous oxide being an example of this.

## Police staff/force (England)

### Strategic direction

Wider police representation was also reported to help align the strategic direction of the partnerships with the operational demands associated with combatting drugs. Police representatives have noted that, as forces continue to develop their data profiles, this role will be further enhanced allowing for more targeted approaches to tackling the issue. More importantly, it was found that having a senior police officer involved in local CDPs meant that police-related actions and decisions can be made and directed more effectively.

## Insight on operational policing

The involvement of police representatives provides CDPs with an insight into the powers available to the police to address both drug use and drugs supply. This was found to be the case particularly in instances where a senior police officer was the SRO or Co-SRO of the CDPs.

This was reported to be essential in order to fulfil the national drugs strategy's aim to 'break the supply chain of drugs' and to ensure that enforcement remains a central feature of the work of CDPs. For example, the representation and involvement of police officers in local CDPs has resulted in the formation of sub-groups across a number of CDPs that specifically focus on the 'supply' of drugs and ongoing work to tackle county lines.

Additionally, the involvement of police officers was found to enable local CDPs across the PFA to have a strong understanding of activities carried out at the frontline, in addition to providing an insight of local needs and policing issues relating to drugs (e.g., OCGs, associated ASB, linked criminality etc).

## Existing working relationships

Similarly to PCCs, senior police officers have reported that their existing contacts and relationships with local delivery partners are key for guaranteeing effective cooperation as a result of the recognised profile of the force within the wider drugs policy sphere. This is further assisted by their role within other existing local strategic partnerships across PFAs (e.g., Community Safety Partnerships which has been found to assist CDPs in establishing themselves locally, as well as supporting necessary connections with other relevant work streams.

## CASE EXAMPLE: MET PFA

For instance, the MET PFA features a CDP where the Co-SRO is a senior policing authority (Acting Superintendent). The CDP straddles two local authorities that co-share a number of services, which are in the same police area (BCU) as each other. As a result, there were already strong working relationships and consistent communication between the Co-SRO and the Council authority in the area before the establishment of the CDP. In addition, the senior police officer is also the Co-Chair of the Community Safety Partnership (CSP) for one of the councils, which the CDP reports to along with public health. The Co-SRO reported that their existing contacts greatly assisted them in achieving high levels of co-operation within the CDP, which would have been harder to achieve without these long-standing relationships.

## Intelligence and Data-sharing

The involvement of police representatives also enables greater sharing of information and police intel/data. The force and PCCs are also able to support the work of their local CDPs via their teams of analysts, which can play a key role in progressing the CDPs' needs assessments and delivery plans and addressing gaps in CDPs where analytical capacity is weak. On this basis, strong collaboration between PCCs and their forces enables them to be an important source of data, providing a vast wealth of information to local delivery partners within CDPs.

In addition, information sharing of police data enables CDPs to take a hotspot approach, while reinforcing and enhancing their ability to coordinate incident-specific responses (e.g., synthetic opioids threat) and identify opportunities for further collaboration and partnership-working.

### CASE EXAMPLE: Cumbria PFA

In Cumbria, the PFCC has the oversight of various data sources through the Safer Cumbria Partnership, which provides the Governance Structure for the CDP. The PFCC has reported having strong data sharing arrangements in place as these agreements had already been operating effectively over a number of years. Through the partnership, members are also able to have access to local intelligence via the force or the Local Focus Hubs. Furthermore, Cumbria's Addictions Board sits under and is the delivery arm of the CDP, is Co-Chaired by Public Health and police. The police also provide their data and intelligence into this group, which often serves to highlight emerging concerns or risks.

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### CASE EXAMPLE: Greater Manchester PFA

The PFCC for Greater Manchester commissions a Drug and Alcohol-Related Deaths Surveillance System with contributions from Local Authorities, in addition to funding the Greater Manchester Drugs Early Warning System and wider drugs trends market research; this intelligence is routinely shared with CDP members.

Nonetheless, both PCCs and policing partners have flagged numerous wider challenges relating to data-sharing, required to assess needs and monitor performance and produce updated dashboards, which in turn affects the identification of local priorities and the delivery of the CDP plans. This was partly attributed to limited access to data, particularly by PCCs, and also a reluctance by partners across the CDPs to contribute to information-sharing.

**KEY QUESTION:** How can data-sharing between local delivery partners and access to key data be improved?

## CDP Strategy and Delivery

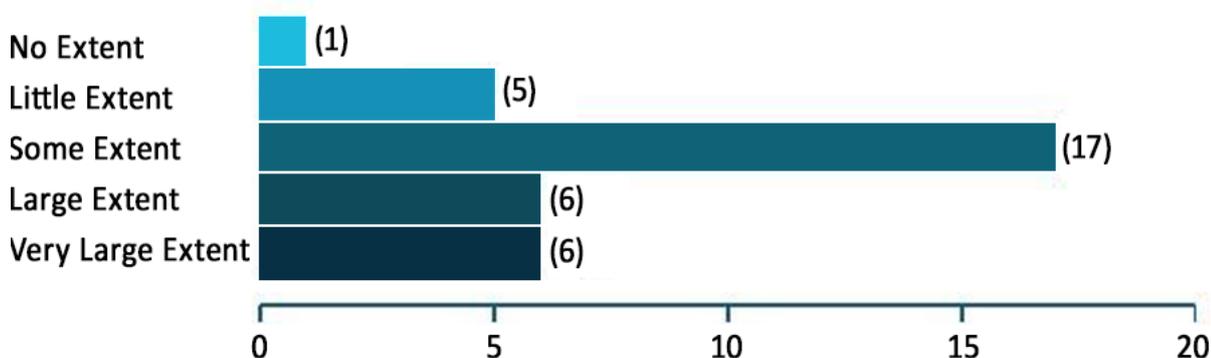
### Police and Crime Commissioners (England & Wales)

Under the Police Reform and Social Responsibility Act 2011, PCCs are required to set the police and crime objectives for their area through a Police and Crime Plan.

**This is a legal document which sets out:**

- The PCC's key priorities
- How they will monitor performance
- How they will hold the Chief Constable/force to account
- An outline of funding and resources that PCCs will provide.

**To what extent do Police and Crime Plans inform CDPs' strategies and delivery?**



Overall, out of 35 survey responses, 34 PCCs/police representatives reported that Police and Crime Plans inform the work of CDPs, with 49% of respondents reporting that it does so to some extent, while 34% believe that it informs the work of CDPs to a large/very large extent. The remaining 17% of respondents noted that it does so to a little/no extent, yet this divide in views is not surprising owing to the natural variance of local policing priorities present in Police and Crime Plans across England and Wales (with drugs use, and related issues i.e., county lines, ASB etc. - not always featuring as a key priority).

## CASE EXAMPLE: Sussex PFA

For instance, the CDPs in Sussex have based their focus on the Harm to Hope Strategy priorities: breaking drug supply chains, continuing to build treatment and recovery systems and reducing drug demand.

**The Sussex Police and Crime Plan has the following priorities:**<sup>8</sup>

- **Public Priority 1:** Strengthen policing, tackle crime, prevent harm and anti-social behaviour.
- **Public Priority 2:** Relentless disruption of serious and organised crime
- **Public Priority 3:** Support and safeguard victims and tackle violence against women and girls

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<sup>8</sup> **Sussex's Police and Crime Plan:** [SPCC - Police & Crime Plan \(sussex-pcc.gov.uk\)](https://www.sussex-pcc.gov.uk)

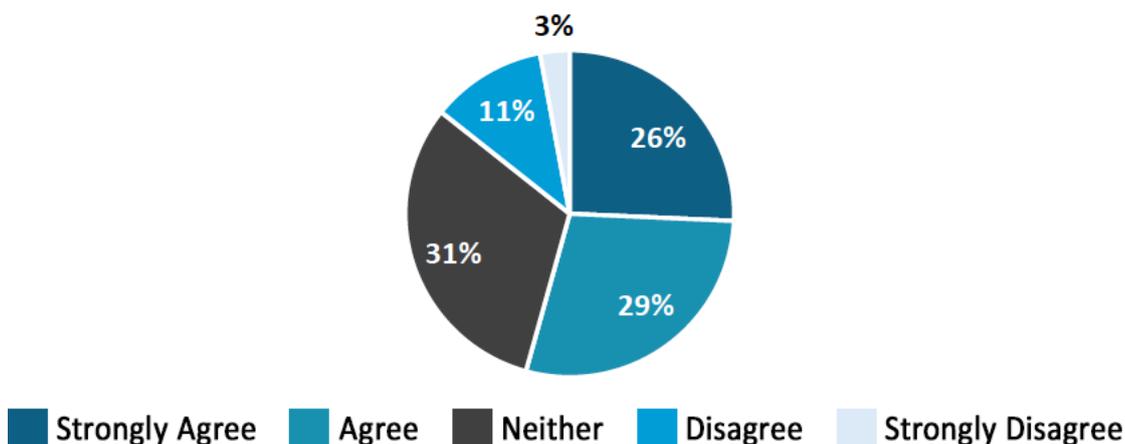
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There is a clear emphasis on partnership working and shared objectives with the priorities of the Community Safety Partnerships (CSPs) supporting the 3 priorities in the Police and Crime Plan. For example, public priority 2 specifically addresses tackling and disrupting Organised Criminal Gangs, as well as allocating further CSP funding to support drug intervention programmes. These priorities reflect the intelligence provided locally by police local authority and health partners, which is the same data used to inform the CDPs' needs assessment.

Current Police and Crime Plans were developed some time prior to the introduction of the Harm to Hope strategy, thus making it harder for PCCs to incorporate their content and priorities within the delivery plans of CDPs during the time of their development and reducing opportunities for plans to help shape the priorities of CDPs and vice versa.

The situation in Wales diverges somewhat from that in England however, since APBs were already in place before the introduction of the Harm to Hope strategy, meaning that the Police and Crime Plans were already being considered by APBs. While the Boards' delivery plans are not solely focussed on the Police and Crime Plan, there are many overlaps since Police and Crime Plan priorities are informed by public consultation, the business community, policing strategic assessment and the Chief Constable, and thus reflect the interests and concerns of the local area.

**Do you agree that this is influenced by the extent PCCs/police representative are involved in CDPs?**



Out of 35 responses, 55% of respondents strongly agree/agree that the involvement of a policing authority within CDPs has an impact on the influence of Police and Crime Plans in dictating the strategic priorities of the partnerships, while the other 45% believe that this is not a significant factor or disagree/strongly disagree with this statement.

Those who support the premise that PCC involvement results in the effective integration of their Police and Crime Plan into the delivery plan of their local CDPs reported that the engagement of PCCs during the consultation and development phase of the local CDP strategies was key. This early commitment and dialogue enabled them to highlight relevant priorities of the Police and Crime Plan and suggest areas for inclusion to wider partners, promoting a strong connection between the two and strengthening the PCC's ability to influence the CDPs' agenda. While a number of police representatives noted that this process was facilitated by the PCC/policing staff being the SRO or Chair of the CDP, others suggested this is in effect more dependent on the level of engagement and representation at meeting and whether local delivery partners also participate in other local partnerships and strategic boards where the PCC and policing representatives have a strong presence (e.g., Community Safety and Violence reduction).

### **CASE EXAMPLE: West Midlands PFA**

For instance, the PCC for West Midlands, who is the SRO of the single Combatting Drugs and Alcohol Partnership within the PFA, facilitated a delivery planning session to give stakeholders the space and opportunity to input their own organisational priorities as part of the development of the partnership's strategic plan. The PCC's Police and Crime Plan was included in this discussion, along with other existing local strategies.

From this viewpoint, it is important to maintain a 'seat at the table' in order to lay the foundations for stronger alignment with the Police and Crime Plans in the future. This is particularly pertinent owing to the fact that there is no duty for members of CDPs (aside from policing partners) to have regard to the Plan, and it is therefore for PCCs and force representatives to monitor when the Police and Crime Plan's objectives are being met as part of the overall work carried out by the partnership.

Others place greater emphasis on the paramount role of the Harm to Hope drugs strategy in informing and driving the priorities of CDPs, as set out in the National Combating Drugs Framework and in the national guidance for local delivery partners provided by the Joint Combating Drugs Unit. This was also found to be true for the requirements that local delivery partners are expected to fulfil set by central funding. In particular, different government funding which target resources to certain key areas - e.g., OHID funding for treatment, HMPPS funding for post-court work, Home Office funding for drug testing on arrest etc. - were reported to largely shape the work and areas of focus of CDPs. By the same token, the alignment between Police and Crime Plans and the delivery plans of CDPs was also found to be strongest where there is funding potential from the PCC, which helps to ensure there is an emphasis on drawing out key themes from the Police and Crime Plan.

## **Future Opportunities: PCC Elections**

PCC elections are due to take place in May 2024. The pre- and post- election periods provides a strong opportunity for engagement with CDP partners to raise awareness of their objectives and priorities within the drugs sphere and, similarly, for partners to discuss the needs and plans of CDPs within the PFA.

PCCs must publish their Police and Crime Plan within the financial year in which they are elected and will consult with their local communities and partners when the plan is in its developmental stage.

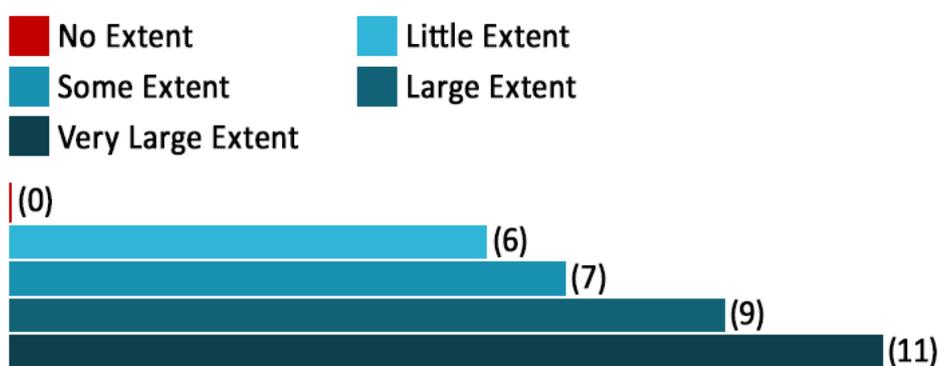
CDP partners should work closely with PCCs to influence the draft plans before they are finalised and published, and make sure that they align with the priorities of the local CDPs and the national drugs strategy more widely. The consultation period can run for several weeks and may involve surveys, online discussions, workshops and events.

PCC elections are an important window of opportunity to strengthen and bridge existing gaps in PCCs' involvement in their local CDPs.

**KEY QUESTION:** How may PCCs, CDPs and the JCDU effectively engage ahead of these developments?

## Police Staff/force

To what extent does your local drug strategy and / or force's drugs market profile link-in with the needs assessment and action plan of your CDPs?



Similarly to Police and Crime Plans, it was found that the extent that the objectives and activities within the force's local strategy's impact the action plan of CDPs is dependent on how closely they align with those of the national drugs strategy and the national outcomes framework and whether drugs is a local priority for the police force per se.

The force's drugs market profile and existing needs assessments were reported to have a much larger influence in shaping CDPs activities due to their data-heavy nature, however - and this was found to be consistent in Wales also.

Moreover, it was found that the CDPs' requirement to develop a Joint Needs Assessment encouraged greater intelligence and data-sharing between partners and incentivised forces that lacked a local strategy or drugs profile, or where they were not up to date, to swiftly develop and update these strategic documents which, in turn, fed back to the development of the CDPs delivery plan.

## CASE EXAMPLE: Gloucestershire PFA

In instances where the force for a PFA does not have an up-to-date drugs market assessment or local strategy, the input of PCCs within CDPs was found to largely bridge this gap. For example, Gloucestershire's force did not have a drugs market profile or local drugs strategy prior to the introduction of the CDP. The rapid development of both these strategic documents was an early quick-win for the CDP and demonstrated the value of having the DPCC as the SRO in being able to set this as an urgent requirement.

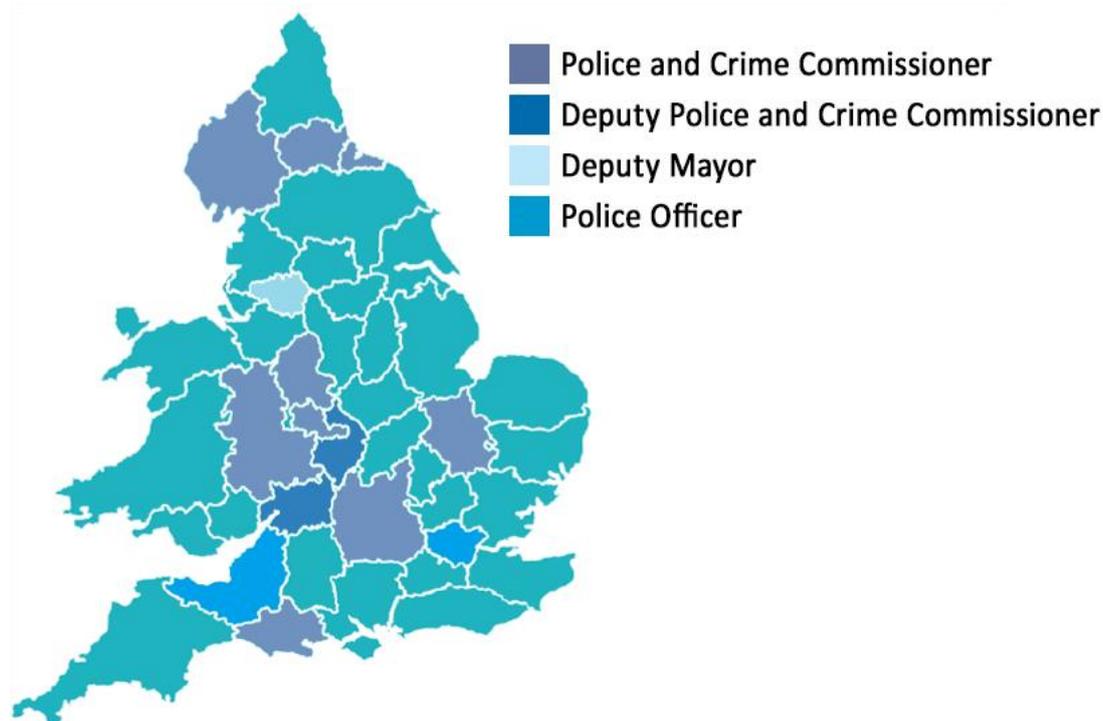
More importantly, these developments did not only focus on enforcement, but included education and prevention elements too. For example, the Constabulary's Drugs Market Profile now has a strong emphasis on prevention and early intervention. This reflects how the Drugs Market Profile aligns with the CDP's action plan. The simultaneous co-development of the CDP development plan and of the force's drugs market profile and local drugs strategy also ensures that the CDP's scope of work includes priorities from a Criminal Justice perspective too - for example, actions to improve community resilience by strengthening rehabilitation pathways for ex-prisoners via secure housing and employment/ volunteering opportunities and drugs treatment programmes.

The activities of CDPs were also noted to be shaped and influenced by a number of other existing key police strategies and profiles.

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# APPENDICES

## APPENDIX A: Map of PFAs where PCC/Police are the SRO of CDP(s)



Combating Drugs Partnerships (CDPs)	Senior Responsible Owners (SROs)
Berkshire West	Police and Crime Commissioner
Bath and Northeast Somerset	Chief Inspector
Bristol	Superintendent and Police Commander
Cambridgeshire and Peterborough	Police and Crime Commissioner
Cleveland	Police and Crime Commissioner
Cumbria	Police and Crime Commissioner
Darlington and Durham	Police and Crime Commissioner
Dorset, Bournemouth, Christchurch and Poole	Police and Crime Commissioner
Gloucestershire	Deputy Police and Crime Commissioner
Greater Manchester	Deputy Mayor of Greater Manchester
Herefordshire, Worcestershire, Shropshire and Telford	Police and Crime Commissioner
Staffordshire	Police, Fire and Crime Commissioner
Warwickshire	Deputy Police and Crime Commissioner
West Midlands	Police and Crime Commissioner

## APPENDIX B: Table of PCC level of involvement in their local CDP(s) (England)

Police Force Area (PFA)	Number of CDP(s) in PFA	PCC SRO/ Co-SRO	PCC set-up an overarching group across PFA's CDPs	PCC Chair or Co-chair of CDP meeting	PCC Chair or Co-chair of CDP Sub-group(s)	PCC/PCC Rep attends CDP Meeting	PCC/PCC Rep attends CDP Subgroup Meeting
Derbyshire	1					Yes	
Cheshire	4					Yes	
North Yorkshire	2					Yes	Yes
Humberside	3				Yes	Yes	Yes
Hampshire	4		Yes			Yes	
Northumbria	1			Yes		Yes	
Surrey	1					Yes	Yes
Cambridgeshire	1	Yes		Yes		Yes	Yes
South Yorkshire	4					Yes	Yes
West Midlands	1	Yes		Yes		Yes	Yes
Warwickshire	1	Yes		Yes		Yes	Yes
Durham	1	Yes		Yes		Yes	
Greater Manchester	1	Yes		Yes		Yes	
Bedfordshire	1					Yes	Yes
Dorset	1			Yes		Yes	Yes
Devon and Cornwall	4		Yes			Yes	
Suffolk	1					Yes	

Police Force Area (PFA)	Number of CDP(s) in PFA	PCC SRO/ Co-SRO	PCC set-up an overarching group across PFA's CDPs	PCC Chair or Co-chair of CDP meeting	PCC Chair or Co-chair of CDP Sub-group(s)	PCC/PCC Rep attends CDP Meeting	PCC/PCC Rep attends CDP Subgroup Meeting
Essex	1					Yes	
Avon & Somerset (PCC Response)	5					Yes	
Avon & Somerset (Police Response)	5	Yes		Yes		Yes	
Northamptonshire	1					Yes	Yes
Cumbria	1	Yes		Yes		Yes	Yes
Gloucestershire	1	Yes		Yes		Yes	Yes
West Mercia	2	Yes		Yes		Yes	Yes
Norfolk	1					Yes	Yes
Sussex	3					Yes	
Merseyside	5		Yes	Yes		Yes	
Hertfordshire	1			Yes		Yes	
Thames Valley	5					Yes	
West Yorkshire	5	Yes				Yes	
Cleveland	1	Yes					
Lincolnshire	1					Yes	
Lancashire	3					Yes	
Kent	2					Yes	
MET Police	31	Yes				Yes	

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The APCC provides support to all Police and Crime Commissioners and policing governance bodies in England and Wales.

