

**Report of:** Neighbourhood Renewal Business Manager

**Title:** Communities Against Drugs (CAD) Project

**Ward:** Blackbird Leys

**Report author:** Craig Buckby  
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**Key Decision:** No

**Lead Member:** Cllr Susan Brown

**Scrutiny responsibility:** Finance/ Community

**RECOMMENDATION:**

That the report be noted and the actions taken, as set out in section 9, be supported.

**Confidential Appendix**

1.1 This report contains a confidential Appendix because it contains exempt information under Part 4 Section paragraph 10.04 / 8 of the Constitution, relating to the business affairs of a third party and paragraph 10.04 / 1 relating to employees of Oxford City Council.

**Introduction**

2.1 This report has been requested by the Portfolio Holder for Community Safety. Concerns were raised about the future of the project and as to why the CAD Project was in difficulty.

2.2 This report sets out the background to the CAD Project, some of the difficulties faced by the Project and it makes some proposals as to the way forward.

2.3 The report takes into account a number of discussions and papers which have been produced by staff and Steering Group members and it draws heavily upon an Independent Evaluation Report 'Leys Communities Against drugs Project', 2005, Richard Huggins, Brookes University.

## The Policy Context

- 3.1 In the context of the Crime and Disorder Act 1998, the UK anti drug strategy 'Tackling Drugs to Build a Better Britain (1998) identifies the need to develop strategies and projects that help local communities counter the effects and impact of substance misuse. This has led to the creation of an Active Community Unit and the Action Against Crime and Disorder Unit (1999).
- 3.2 The University of Lancaster has been funded to carry out community led research into substance misuse in communities. There have been two such projects funded in Oxford, the CAD Project, the Bangladeshi Project. A third related project has been funded in Barton through the Primary Care Trust and Thames Valley Police.
- 3.3 The issues raised in this report are therefore far more fundamental than one project. They relate to the whole structure of substance misuse services, funding and the ethos of rehabilitation in the City and the role of other agencies such as the Primary Care Trust, Drug and Alcohol Action Team, Thames Valley Police and others.

## Background to the CAD Project

- 4.1 The CAD Project was originally developed as a community action research model based on need identified by the SRB5 Project at Blackbird Leys, namely 'Tackling Drugs Project'. The need identified was specifically around drugs and substance misuse in Blackbird Leys in 2001. A timeline for the project is given in Annex 1. A summary is given below.
- 4.2 **Phase 1:** The Tackling Drugs Project used a variety of community participation tools to increase resident/professional involvement in the Tackling Drugs Project, including the formation of a steering group, which would be used to take the CAD project forward. This work was supported through staff in the City Council, Neighbourhood Renewal Business Unit as well as staff from the Primary Care Trust, Thames Valley Police and other agencies.
- 4.3 **Phase 2:** A successful bid was put into Oxford City Drug and Alcohol Reference Group to achieve the funding through the 'Communities Against Drugs', Government funding stream. This was only ever a limited amount of Government funding that did not have a sustainable strategy of longevity. At this stage the project utilised unpaid volunteers. The volunteers were trained in participatory research techniques and they carried out a needs analysis on the estate.
- 4.4 At this point the Project was directed towards capacity building, addressing community responses and sign posting for both agencies and the community. The Steering Group was enlarged. A report was presented

to community representatives and agencies on the needs identified and potential responses were discussed.

- 4.5 **Phase 3:** The Leys Linx (SRB 5) had come to an end of its funding and remit and the CAD Project established its own entity. Following the publication of the report the Project changed emphasis and structure.
- 4.6 The CAD Project obtained funding and services were set up as a result of the needs identified through the research. The acquisition of a shop gave the project a physical presence. Services now include a drop-in facility (City wide facility), volunteers project, healthy living sessions, outreach work, therapist training, youth work and general community development work.
- 4.7 The project used paid volunteers and session workers to provide these services. To resolve any overlap with DHSS the community facilitators were taken on temporary, casual contracts with the City Council, which was also acting as the holding body for CAD Project Funds.
- 4.8 The City Council, Neighbourhood Renewal Unit provided Officer support for 2.5 days a week, offering advice and guidance on substance misuse and on other matters such as budgets and human resources issues. The budget was managed by the External Contract Officer within Neighbourhood Renewal Unit. The project also had a Team Leader who was responsible for the day to day running of the project (10 hours a week).
- 4.9 The 'Core' Steering Group members include representatives from the Primary Care Trust, Brookes University and Thames Valley Police and Healthy Living Initiative, volunteers and staff also attend Steering Group meetings.

## **Funding**

5.1 The project has attracted an array of interest from funding bodies during its existence in all stages of service delivery/formation. These have included:

### **2002-2003**

£13,500 from Atmosphere (now the Oxford Safer Communities Partnership)

### **2003-2004**

£2000 from the Scarman Trust  
£30,000 from Oxford Safer Communities Partnership

### **2004-05**

£22, 300 Oxford Safer Communities Partnership  
£5,000 from East Oxford Healthy Living Initiative  
£8,088 from Oxford City Council (Substance Misuse budget)  
£1,000 from Area Committee

### **2005-06**

£18,000 Oxford Safer Communities Partnership  
£4,6000 East Oxford healthy Living Initiative

The rescue package includes additional funding from:

£1,000 Primary Care Trust  
£ 1,000 Oxford Safer Communities Partnership  
£1,000 Thames Valley Police  
£1,914 Drug and Alcohol Action Team (specific items only)  
£5,872 East Oxford Healthy Living Initiative  
£1,175 Neighbourhood Renewal (rent)

5.2 In March 2005 the project received funding from the University of Lancaster of £20,000 for a research project using questionnaires, focus groups and interviews. The aim of this research is to develop the Project to research and analyse the needs of vulnerable women who have a dual dependency. The research is to be conducted between April and December 2005. The funding is to pay for volunteers expenses to carry out work.

### **Staffing implications**

6.1 As a contribution to the project Oxford City Council provided accountancy and budget monitoring and staff payroll services for the Project. The City Council provided a member of staff 2.5 days a week to provide substance misuse and general advice and community development support to the Project. The Officer also represented the City Council on the Steering Group.

6.2 In the course of carrying out budget monitoring it was identified that the project was substantially over spending and as a result it was necessary for the Council to issue notice to the CAD staff because of contractual obligations.

### **The strengths of the project**

7.1 The Brookes Evaluation report identified the following strengths of the project:

7.2 That the project was a cost effective way of delivering community needs analysis. The community stakeholder and agency participation in Phase 1

of the Project was impressive due to the participatory learning techniques used.

- 7.3 The training and experience provided to local workers has enabled the development of a group of experienced community development workers.
- 7.4 The development of the Tackling Drugs Network, bringing together all interested and concerned parties for the first time on the estate.
- 7.5 The initial commitment to a research model has developed into an effective model for capacity building and as a result a similar project has been established in Barton. (This project does not directly deliver services but places emphasis on working with existing agencies in the area to get the issues of drug misuse on other agencies agendas, for example Housing, Education and the Police).
- 7.6 The CAD Project has been effective in gaining representation from ethnic minority groups and other traditionally excluded groups.
- 7.7 At the time of writing this report detailed information on the number of people accessing the drop in service are not available. However the Minutes of the Steering Group meeting, held in May 2005 gives a useful snapshot of the reach of the Project. There were a total of 39 contacts, 20 males and 28 females. 12 users and 16 ex users and 10 non users. 30 were white and 9 were from ethnic minority communities. 18 were new contacts and 18 returning. 12 accessed information, 5 signposting and 21 therapy.

### **The Project Difficulties**

- 8.1 The Project has only received piecemeal funding . The funding available has not been adequate to cover the core running costs and adequate Team Leader time to properly establish the project (currently only 10 hours a week). The Project hopes that by becoming a Charity that it will be able to access funding from sources such as the Lottery and Trusts.
- 8.2 The Project outgrew its original structure. The Steering Group meetings were poorly attended by the Core Steering Group members but well attended by volunteers and staff and the community. Originally the role of the Steering Group was not as a management group. This was because services were not being directly delivered at this time. The project expanded rapidly but the terms of reference of the Steering Group were not revised to address this situation. This led to a lack of clarity on the Steering Group's and roles and responsibilities and lack of direction.

8.3 The transition from a consultation project to a direct service provider has caused problems. It is difficult to create a project that delivers professional services whilst still being owned by the community. There were difficulties developing the shop and in turning a group that had been set up to run consultation into an organisation capable of delivering services.

8.4 In the first phase of the Project there was no line manager and participatory learning techniques advocated a democratic process. The decision to pay staff and the management structures which came with staff being on the City Council pay roll caused conflict between the public image of the project and the professional standards expected by the City Council.

8.5 CAD identified themselves as a body that is independent from the Council but as it is not formally constituted it needed the City Council's support. The City Council was the only agency able to provide a payroll service and budget support. Inevitably this led to conflict between the participatory democracy model and the need for understanding of the constraints upon which public sector agencies function. The Council has been accused of taking the Project over when in fact it kept itself at arms length as much as possible whilst maintaining budget and personnel controls.

8.6 This led to debate about a how and by whom different aspects of the project should be administered / regulated. This sometimes caused difficulties. For example the Project wanted to make cash payments to volunteers but the Council is not in a position to allow this because of financial rules and regulations.

### **The current position**

9.1 There needs to be now a focus on obtaining charitable status and sustained fund raising. The Steering Group has been reinvigorated and funding has been secured from partners, including the Healthy Living Initiative, Primary Care Trust, Oxfordshire Drug and Alcohol Action Team and Thames Valley Police. This additional funding will enable the project to continue until December 2005.

9.2 The aim is for the Project to become a charity in December 2005 and it is hoped to identify Trustees who will submit an application to the Charities Commission shortly. There have been some delays in getting the articles of memorandum finalised and in identifying the Trustees who will be signatories this may make it problematic to achieve the December 2005 deadline.

9.3 Neighbourhood Renewal continues to provide invoice processing and budget monitoring. Support is also being provided from the Anti-Social

Behaviour Coordinator (1 day a week) and the Community Safety Coordinator (as and when necessary) to work with the Steering Group and ensure that appropriate management structures are in place. Providing a link to the City Council and ensuring that budgets are not overspent.

9.4 Oxford City Council officers from Neighbourhood Renewal and Strategy and Review will provide support to financially manage the project until it becomes a registered charity, when this role will be handed over the Board of Trustees. Once this has been established Oxford City Council will withdraw from the management of the project.

9.5 The difficulties that CAD find itself in highlights a need for the City Council, the Primary Care Trust and the Police to have a clear and agreed policy about the value and need for these types of projects and how they are to be funded. The Drug and Alcohol Action Team (DAAT) has a policy of not funding drop in and signposting services (Tier 1) and indeed have recently reduced funding to Libra Croustoun an established Drug Misuse Support Agency. If these projects are not to be funded by the DAAT it raises the question as to where such groups will receive funding from. Experience has shown that charities and trust will fund project work but core costs are difficult to fund raise for.

9.6 There is a need to bring together all of the community based projects involved in Drug Misuse in their communities in order to share good practice, funding and resources.

9.7 There is also a need for the City Council to have a clear understanding of its remit in relation to drug misuse services. The Council clearly had a role to play in the first phase of the CAD Project, facilitating the consultation and capacity building. However, its role in supporting the direct delivery of drug misuse services is not so clear.

9.8 It is proposed that Neighbourhood Renewal Officers have discussions with other agencies about the delivery of specialist services, such as referral for prescription, counselling and therapies and will report back to the Executive Board with a strategy for taking these wider issues forward.

THIS REPORT HAS BEEN SEEN AND APPROVED BY:

Portfolio Holder: Susan Brown

Strategic Director: Michael Lawrence

Legal and Democratic Services: Lindsay Cane

Financial Management: Claire Reid

There are no background papers

## Annex 1

### **Timeline for CAD**

- Winter 2001- SRB5 Blackbird Leys, Blackbird Leys Community Development Initiative and Oxford City Council staff met to discuss issues of substance misuse on Blackbird Leys informed by users of the Leys Linx Service. The Leys Linx Project was the lead organisation for project at this time.
- Winter 2001-Funding bid sent to Oxford City Drug reference Group to acquire funds to pump prime a pilot project and the bid was successful.
- Spring 2002- SRB5 BBL, Oxford Brookes University, Oxford City Council staff develop a framework to take forward the issues raised previously and to seek further funding to help address these issues.
- Spring 2002- Using a community facilitation model, funded through the Drugs Reference Group a number of meetings were held in Blackbird Leys and as a result a Working Group was formed.
- Spring 2002- Funding bid presented to Ox City Council Drug Reference Group was successful.
- Summer 2002- Steering group formed, community consultation event held, project promoted at various community meetings, volunteers recruited to help implement proposed outcomes of funding bid.
- Autumn 2002- Leys Linx mentions exit strategies for their work with this group and are unsure of how much more time and commitment they can input in to the project. A new lead for the project was sought and partner groups were consulted in terms of what should happen next.
- Winter 2003- Discussions around where the project is headed and the drive for a different direction is discussed at a series of meetings set in the community. A premises for the project is identified in Blackbird Leys.
- Spring 2004- Oxford City Drug Reference Group presented with a third funding bid to take some identified projects forward.
- Spring 2004- Leys Linx SRB funding ends. Forward strategies are put in place to support projects. Neighbourhood Renewal offered to provide the Health Promotions Officer for 2.5 days per week to provide advice and guidance to the Project. A Team Leader was employed by the project, through the City Council payroll system.
- Summer 2004- A very successful and well attended project day launches the new, extended project.
- Autumn 2004- Additional services are developed including a drop- in for the community at the new premises and the payment of project workers on a sessional basis.
- Autumn 2004- The project is starting to talk about further expansion as the needs of the community are becoming clearer.
- Autumn 2004- Further funding bid to Lancaster University for community research and for the payment of volunteer community researchers. The bid was successful.



- Spring 2005- Budget difficulties identified. Monies and fund raising discussed at team meetings. Meetings between Team leader and Oxford City Council held to discuss concerns with the budget.
- Spring 2005 – With the projects desire to meet the needs of the community they were committing themselves to funding services which could not be sustained by the budget. The project identified that in order to obtain further funding it would need to become a Charity.
- Summer 2005- Exit strategies are discussed as funding has now run out. The City Council have no choice but to issue workers with formal notice and offer support. The project is revised to non paid volunteers for the core work without a drop in but maintaining the premises until September.
- Summer 2005- Original partners from Steering Group meet to discuss rescue package. To date a package is in place which secures the project until December 2005 at which time it is envisaged that the Charity will be in place and able to access additional funding.

