

## Draft - Supporting Information and Impact Assessment

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| Proposal:                      | Adult Substance Misuse Services |
| Executive Lead:                | Councillor Derek Mills          |
| Director / Assistant Director: | Caroline Dimond                 |

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| Version: | 1 | Date: | October 2016 | Author: | Nanette Tribble / Ian Tyson |
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### Section 1: Background Information

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| <b>1.</b> | <p><b>What is the proposal / issue?</b></p> <p>The proposal is to reduce the budget for the Substance Misuse Service by £156,000 in 2017/18. The current budget for this provision is c£2.4m which means the proposal is a 6.5% reduction.</p> <p>In 2018/19 the proposal is to reduce the budget by a further £77,000.</p> <p>The proposed budget for 2017/18 is £2,596,000.</p> <p>While negotiations and consultation will need to take place with Torbay and South Devon NHS Foundation Trust the savings in 2017/18 could be found through the following:</p> <ul style="list-style-type: none"> <li>• Further streamlining of the management structure</li> <li>• Reduction in medical sessions for the prescribing of opiate substitute therapy (i.e. methadone)</li> <li>• Deleting of enhanced pathways, such as for criminal justice referrals into treatment, where service users receive an enhanced level of service and the criminal justice system receives regular attendance at management meetings and specialist reports for sight of the Court</li> <li>• A reduction in 'patient-facing' time</li> <li>• Reduction in the intensity of support for people, with a potential reduction in the frequency of appointments and specialist sub-services.</li> </ul> <p>2018/19 further reductions could be found through:</p> <ul style="list-style-type: none"> <li>• Reduced 'patient-facing' time, which has the potential to impact on practitioner roles.</li> <li>• Considering the ability to deliver a further reduction in medical sessions for the prescribing of opiate substitute therapy</li> <li>• Consider whether certain populations can be offered safe and effective services which do not require regular or frequent contact with the treatment service.</li> </ul> |
| <b>2.</b> | <p><b>What is the current situation?</b></p> <p>Drug use occurs in Torbay, as it does everywhere. Public Health England states the impact of drug use nationally is:</p>   |

- £26,000 of crime is committed by each heroin or crack user not in treatment
- The annual cost of looking after children of a drug using parent is £42.5m
- 29% of all serious case reviews have drug use as a risk factor
- Every £1 spent on drug treatment saves £2.50 to society.

Alcohol use also places significant burden on local public services. Public Health England state the impact of alcohol use nationally as:

- 27% of all serious case reviews mention alcohol misuse
- Deaths from liver disease have increased 15% between 2011 and 2013
- £7 billion pounds is lost due to reduced productivity.

The Substance Misuse Service in Torbay is currently commissioned from Torbay and South Devon NHS Foundation Trust. The Service has already absorbed a £100k reduction in funding during 2016/17, which has partly been achieved by re-configuring the contracting arrangements with no direct impact on the availability of services. The service is not mandated.

The current Substance Misuse Service provides:

- Community alcohol service – an open access service where people can be referred/self-refer for treatment for their alcohol consumption. Treatment includes group work, one to one work and prescribing where clinically appropriate, and signposting into recovery and peer support groups. In addition there is support for carers and families.
- Hospital Alcohol Liaison service – a specialist hospital team designed to screen and refer patients into community treatment for their alcohol use, and increase identification of people in Torbay Hospital whose drinking is above recommended levels and detrimental to their long-term health
- Drug service – an open access service where people can come into the community team for treatment for their drug use, including use of prescription drugs, illegal drugs and novel psychoactive substances (aka 'legal highs'). Treatment includes group work (including high intensity), one to one work and prescribing where clinically appropriate and signposting into recovery and peer support groups. In addition there is support for carers and families.
- Specialist detoxification from alcohol or drug use.
- Testing for blood borne viruses e.g. HIV and vaccination against Hepatitis B.

The current commissioning and contract arrangements have opened up the possibility of safely reconfiguring the delivery of the service. The re-commissioning of the three previous contracted providers into one contract means that there is current potential to streamline medical provision, management, staffing and service delivery; some of which will impact on 'patient-facing' time in 2017/18. The further reductions in 2018/19 will almost certainly have an impact on patient facing time and therefore will impact on staff involved with direct care.

The impacts of this proposal could be greater for families due to proposed reductions in other areas of public health work such as public health nursing.

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| <p><b>3.</b></p> | <p><b>What options have been considered?</b></p> <p>The deletion of entire elements of this contract has been considered. However, for substance misuse services to be effective, each needs to work as an integral part of the wider 'system'.</p> <p>The re-contracting arrangements in 2015/16 have paved the way for commissioners to further reduce the financial value of this service by bringing three Substance Misuse Services for adults under one Local Authority contract.</p> <p>This service will form part of the emerging vulnerable and complex adult service; scoping currently being undertaken within the local authority and involving key strategic partners (Health, Police and Probation for example).</p> |
| <p><b>4.</b></p> | <p><b>How does this proposal support the ambitions, principles and delivery of the Corporate Plan 2015-19?</b></p> <p>This proposal supports the following principles of the Corporate Plan:</p> <ul style="list-style-type: none"> <li>• Use reducing resources to best effect</li> <li>• Reduce demand through prevention and innovation</li> </ul>   |
| <p><b>5.</b></p> | <p><b>Who will be affected by this proposal and who do you need to consult with?</b></p> <p>There is the potential for the following to be potentially affected by this proposal:</p> <ul style="list-style-type: none"> <li>• Service users</li> <li>• Staff in the service</li> <li>• Other commissioners, for example Office of Police and Crime Commissioner (OPCC) and Torbay and South Devon Clinical Commissioning Group (CCG)</li> <li>• Primary care colleagues in GP Practices</li> <li>• Torbay and South Devon NHS Foundation Trust</li> <li>• The general public.</li> </ul>   |
| <p><b>6.</b></p> | <p><b>How will you propose to consult?</b></p> <p>It is proposed that Public Health team will consult on how to work in a more integrated and streamlined way, and to provide more cost-effective, high quality Substance Misuse Services by:</p> <ul style="list-style-type: none"> <li>• Service users will be consulted through focus groups at existing sessions.</li> <li>• Facilitating access to the on-line corporate budget consultation</li> <li>• Focus groups with staff in the Substance Misuse Service to gauge views on how the service can work in a more integrated way and be streamlined.</li> <li>• Focus groups with people who have been in Substance Misuse Services in Torbay.</li> <li>•</li> </ul>        |

## Section 2: Expected Implications and Impact Assessment

(These sections will be updated and expanded following the consultation period.)

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### What are the expected financial and legal implications?

- Will create financial savings for contract years 2017/18 and 2018/19
- May create redundancy liabilities, if affected post holders cannot be redeployed into wider Torbay and South Devon NHS Foundation Trust services
- Risk of legal challenge to these proposals is anticipated to be on the low side as this is not a mandated service.

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### What are the expected risks?

Should the services have to reduce the intensity of support and/or the enhanced provisions for specific client groups (e.g. criminal justice clients) there will be a potential impact on other services which these service users often use. These include Primary Care GP Practices, Accident and Emergency Department, Police, emergency accommodation provision, and the community and voluntary sector. There may be increased use of these services, should people wishing to access Substance Misuse Services not be able to get an appointment. However, at present, there are no waiting lists to access Substance Misuse Services.

The following potential risks have been identified at this stage:

- Service models will describe a less-intense provision of support – for example, one-to-one support being replaced by group support, or less frequent appointments/reduced specialist clinics and sub-services.
- Services are likely to report reduced numbers of people successfully completing treatment – meaning people get ‘stuck’ in the system, with sustained periods of dependence on services provided in Torbay, such as housing, Safeguarding (Children’s and Adult’s), Children’s Services, opiate substitute therapy prescribing *etc.*
- Reduced successful recovery rates for those in treatment, which could lead to poorer outcomes for individuals in terms of employability, independence and economic activity. Increased periods of prescribing of opiate substitute therapy (such as methadone *etc.*) for people, as they take longer to journey through recovery, to the point of successful drug-free discharge.
- Increased risk of prolonged criminality for people using drugs, relating to both acquisitive *crime* and vulnerability offences like domestic abuse.
- Decreased responsiveness between Substance Misuse Services and other services, like criminal justice agencies, Job Centre Plus *etc.*
- Potentially a reduced ability of the service to maintain existing levels of service user monitoring of treatment compliance and capacity to address concerns. This in turn could lead to an increased risk of a serious event occurring e.g. children or vulnerable adult safeguarding or death in treatment.
- Existing health inequalities across Torbay could widen and could lead to early mortality in this vulnerable and complex service user group.

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|  | <p>While the risks are balanced by the fact that the numbers of people using this specialist service represent a small proportion of people in Torbay, the potential risks and impacts described above could create greater demand and cost pressures for partner agencies.</p> |
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