

Report to:	Cabinet	Date of Meeting:	5 September 2019
Subject:	Community Substance Use: Assessment, Treatment and Recovery Service		
Report of:	Head of Health and Wellbeing	Wards Affected:	(All Wards);
Portfolio:	Cabinet Member - Health and Wellbeing		
Is this a Key Decision?	Yes	Included in Forward Plan:	Yes
Exempt / Confidential Report:	No		

Summary:

In July 2016, Mersey Care NHS Foundation Trust were awarded a contract to provide Adult Substance Use: Assessment, Treatment and Recovery Services with effect from 1st October 2016. The contract was awarded for three and a half years with an option to extend for up to a further two years. Consideration is now required on exercising continuation options as the core contract is due to expire on 31th March 2020.

Recommendation:

To give delegated authority to the Director of Public Health in consultation with the Cabinet Member for Health and Wellbeing to exercise the option to combine both twelve-month extension / continuation options and exercise an extension to the existing contract for a period of two years from the 1st April 2020.

Reasons for the Recommendation:

For the past two and a half years, Mersey Care NHS Foundation Trust have provided Adult Substance Use: Assessment, Treatment and Recovery Services and have made significant improvements in both the effectiveness of treatment delivery and the reliability of data recording and reporting. The service has demonstrated an overall improvement in the numbers of people successfully engaged and completing treatment with abstinence rates for opiates, crack cocaine and alcohol all within the expected range as calculated by the National Drug Treatment Monitoring System (NDTMS). Local treatment engagement rates for opiates, crack cocaine and alcohol use all exceed national rates while no clients have waited longer than three weeks to receive an intervention.

Public Health Commissioners have no concerns over the quality, performance or governance of the current service. Moreover, the above recommendation would provide a longer period of service stability and enable the service to further develop and consolidate important collaborative projects that have been recently initiated. The option would also reduce cost to the Council from engaging in an early procurement exercise.

Alternative Options Considered and Rejected: (including any Risk Implications)

- i) Exercise one year extension / continuation option. This option would provide a degree of continuity and stability. However, any continuity / stability derived from exercising this option would be limited to twelve months at which point the Council would still need to consider exercising the second extension / continuation option or re-tender the service.
- ii) Conducting a full procurement exercise would not bring about any significant benefits for Sefton Council, health and social care partners or for users of the substance use service.

Considerable savings were realised throughout the 2016 procurement exercise with a contract value reduced from £3,599,574 per year to £3,276,454 per year. The contract was awarded following robust assessment and evaluation procedures and it was clear that there were only a limited number of acceptable options available within the open market. Mersey Care NHS Foundation Trust are a large local health care provider and are able to draw on a variety of specialist services within the Trust to further compliment service provision, including community mental health and psychology services. Moreover, recent innovative collaborative projects between Mersey Care NHS Foundation Trusts' Substance Use Service, Ambition Sefton and the Trusts Life Room facilities as well as with Sefton Council Housing Options Team are showing extremely encouraging outcomes with the option to firm up these arrangements via contract variations should an extension be authorised.

What will it cost and how will it be financed?

(A) Revenue Costs

The cost of the service will be met from the existing Public Health budget allocation. The contract will include provision for variation and early termination by the Council for convenience in the event of further reduction in funding and the requirement for the Council to achieve an overall balanced budget.

(B) Capital Costs

There are no capital costs for the Council associated with this Service.
Implications of the Proposals:

<p>Resource Implications (Financial, IT, Staffing and Assets):</p> <p>The proposals aim to offer maximum value for money while ensuring stability in the drug and alcohol treatment system. The cost of the service will be met within the existing Public Health budget allocation.</p>
<p>Legal Implications:</p>
<p>Equality Implications:</p> <p>There are no equality implications.</p>

Contribution to the Council's Core Purpose:

Protect the most vulnerable: Adult substance use: assessment, treatment and recovery services target the most vulnerable groups whose alcohol and other use problems compound physical and mental ill health and increase risk among disadvantaged sections of the community.
Facilitate confident and resilient communities: Adult substance use: assessment, treatment and recovery services help individuals to live an independent and drug free life and help people to achieve meaningful integration within their community.
Commission, broker and provide core services:
Place – leadership and influencer: Not applicable
Drivers of change and reform: Not applicable
Facilitate sustainable economic prosperity: Not applicable
Greater income for social investment: Not applicable
Cleaner Greener Not applicable

What consultations have taken place on the proposals and when?

(A) Internal Consultations

The Head of Corporate Resources (FD5742/19) and the Chief Legal and Democratic Officer (LD4866/19) have been consulted and any comments have been incorporated into the report.

(B) External Consultations

Public consultation took place during the procurement exercise. Recent feedback from CCG colleagues suggests that communication and pathways between Southport hospital based alcohol services and Ambition Sefton have improved significantly.

Implementation Date for the Decision

Following the expiry of the “call-in” period for the Minutes of the Cabinet Meeting

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Appendices:

There are no appendices to this report

Background Papers:

There are no background papers available for inspection.

1. Introduction/Background

- 1.1. Since the mid-1980s substance use treatment services have been central to sustaining low rates of HIV, injecting related infections and other drug and alcohol related harm. Research continues to show a positive association between engagement with effective substance use treatment and a reduction in harm, crime and criminal activity associated with illicit substance use. Recovery Orientated Treatment Systems have demonstrated significant improvements in personal resilience and social capital growth, increasing individual access to and achievements from education, training and employment opportunities.
- 1.2. Problematic substance use has been described as a ‘chronic relapsing condition’, dependent drug and alcohol users will typically present to services with a range of complex physical, emotional, psychological and psychiatric health problems. Clients accessing Sefton’s substance use treatment population are typical of this description with 43.6% of the treatment population having been in treatment for six or more years. In 2018/19 the number of individuals in structured drug and alcohol treatment (not including those who regularly access the service for advice and on-going recovery support) reached 2,316, an increase of 447 receiving structured treatment since 2016/17.
- 1.3. Effective treatment and recovery requires a range of services and interventions including; specialist clinical services offering opiate replacement treatment, stabilisation and reduction programmes, medically assisted alcohol withdrawal programmes, psychosocial interventions and support, non-structured support

including mutual aid, harm reduction services, including needle and syringe programmes and referral pathways to related health and social care services.

- 1.4. Specialist substance use assessment, treatment and recovery services are an integral part of any substance use treatment system and an essential element in the reduction of drug related harms including HIV and other blood borne viruses, overdose deaths and injecting related injuries as well as a range of alcohol related health harms.
- 1.5. Successful recovery from addiction and dependency on substances including alcohol requires sustained and co-ordinated care across services. Evidence points to effective and integrated treatment programmes as being central to enabling people with substance use problems to realise a drug and alcohol-free life style and sustain longer periods of abstinence. An integrated system increases efficiencies by reducing duplication between services, improves access to a range of services appropriate to the needs and requirements of service users, optimises treatment and recovery outcomes and improves the safety of individuals, their children and families and the communities in which they live.
- 1.6. Sefton's integrated system includes referrals from a range of sources including; GPs and Primary Care, Adult Social Care, Community Mental Health Teams, Hospital and Specialist Secondary Care, Prison and Probation Services as well as self-referrals. Treatment pathways include assessment, treatment, detoxification, stabilisation, relapse prevention and recovery support, and can be delivered in a variety of settings both community and residential.
- 1.7. Structured drug and alcohol treatment interventions (pharmacological and psychological) are determined by a combination of assessment of health and social care need. Validated assessment tools along with a comprehensive assessment of health history, home and social circumstances, as outlined in National Institute for Health and Care Excellence (NICE) guidance, informs the type of detoxification (medically or non-medically managed) and the environment where interventions should be undertaken.
- 1.8. Mersey Care NHS Foundation Trust provide integrated adult treatment services including assessment and care planning, opiate substitution treatment either on a reduction or maintenance basis, community detoxification (pharmacologically and non-pharmacologically) assisted, psychosocial interventions, recovery support and relapse prevention.
- 1.9. For clients requiring detoxification, the first-line offer is community detoxification within the adult treatment service. Where severe dependency, complex physical and / or mental health needs are indicated, seamless transfer to Mersey Cares' Medically Managed Residential Detoxification Service provides the most suitable clinical environment to manage risk and health needs.

2. Commissioning and the Impact on drug treatment

- 2.1. In its 2017 Report; *The Impact of Commissioning on Substance Use Treatment*, The Advisory Council on the Misuse of Drugs (ACMD) noted that the frequency of recommissioning substance use treatment services was causing unnecessary

'churn' and destabilising the treatment system. The Advisory Council were unequivocal in their conclusions stating that *frequent re-procurement of substance use treatment is costly, disruptive and mitigates treatment recovery outcomes*. They called for Government and Local Authority Commissioners to ensure that re-commissioning drug and alcohol treatment services is normally undertaken in cycles of five to ten years, with longer contracts and careful consideration of the unintended consequences of re-commissioning.

- 2.2. A strong body of evidence supports the claims that investing in drug and alcohol treatment saves money. Estimates show that the social and economic costs of alcohol related harm amount to £21.5bn, while harm from illicit drug use costs £10.7bn. These include costs associated with deaths, the NHS, crime and, in the case of alcohol, lost productivity. Recent benchmarking activity show Sefton Substance Use Services as providing good value for money while providing good service outcomes.
- 2.3. Providing well-funded drug and alcohol services is good value for money because it cuts crime, improves health, and can support individuals and families on the road to recovery.
- 2.4. The combined benefits of drug and alcohol treatment amount to £2.4billion every year, resulting in savings in areas such as crime, quality-adjusted life years (QALYs) improvements and health and social care. Quality-adjusted life years (QALYs) are measures of life expectancy and quality of life used in health economic evaluations and resource allocations.
- 2.5. Alcohol treatment reflects a return on investment of £3 for every £1 invested, which increases to £26 over 10 years.
- 2.6. Drug treatment reflects a return on investment of £4 for every £1 invested, which increases to £21 over 10 years.
- 2.7. A similar case can be made for the impact of disinvestment in substance use treatment and the cumulative social cost of every £1 cut from treatment. In October 2017, the Guardian Newspaper ran a story citing Sefton as being one of worst hit Local Authorities for cuts to its drugs and alcohol treatment budget. Against this backdrop of financial challenges public health commissioners, Mersey Care NHS Foundation Trust Ambition Sefton, health and local authority partners have forged strong collaborations – pioneering innovative service provision while ensuring that any duplication is stripped out of the treatment and recovery system.

3. Integrating housing support and substance use treatment through strong collaboration

- 3.1. In its 2019 Report on drug related harms in homeless populations, the ACMD noted that: *"The needs of people who are homeless, particularly rough sleepers, are not well met by mainstream benefit, health and social care and some drug services"* The Advisory Council concluded that an integrated health, social care and community care approach to recovery and housing needs of people who are homeless would provide the optimal model of service delivery.

- 3.2. Collaboration between Sefton Council's Housing Support Team, Mersey Care Foundation Trust Ambition Sefton and Public Health has resulted in improved support within local hostels and a pilot clinical outreach project working within rough sleeper services.
- 3.3. Weekly clinical in-reach sessions to hostels in Bootle have proved successful in engaging individuals with complex health care needs with substance use treatment and health care support while clinical outreach sessions in Southport have been working with rough sleepers and supporting the newly developed complex bed unit.
- 3.4. On-going dialogue with Ambition Sefton show an encouraging appetite to progress this collaboration further formalising current arrangements and considering further developments including satellite needle and syringe programmes in hostels and provision to initiate prescriptions for opiate substitution treatment. Collaboration and integration between housing support, rough sleeper projects and Mersey Care NHS Foundation Trust Substance Use Service, Ambition Sefton can be written into the current Ambition Sefton Service Specification via a contract variation should the contract be extended.