



Health Scrutiny Panel

7 November 2013

Report Title	Substance Misuse Service Contract Award – Six Month Review Update	
Cabinet Member with Lead Responsibility	Councillor Sandra Samuels Health and Well Being	
Wards Affected	All	
Accountable Strategic Director	Sarah Norman, Community	
Originating service	Public Health	
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Recommendation(s) for action or decision:

The Panel is recommended to:

1. Scrutinise the information provided on the performance and mobilisation of the first six months of the contract.
2. Identify a delegation from the panel to attend the service's presentation of its new branding and delivery model on 28 November 2013 at 10 am, Dunstall Racecourse.

1.0 Purpose

- 1.1 The purpose of the report is to provide an update on the first six months of the new, specialist drug and alcohol treatment service contract between the Council's Public Health department and NACRO (National Association for the Care and Resettlement of Offenders - a national substance misuse and crime reduction charity)

2.0 Background

- 2.1 Following a ten month procurement programme Wolverhampton City Council commenced an initial three-year contract with substance misuse and crime reduction charity NACRO to deliver a new, consolidated drug and alcohol treatment service for young people and adults on 1 April 2013. The contract is delivered by NACRO in partnership with Birmingham and Solihull Mental Health NHS Foundation Trust and Aquarius.
- 2.2 Prior to the tender the three previous drug and alcohol services; Addiction Services, Black Country Partnership NHS Foundation Trust, YMCA Bridge and Aquarius were resourced from ring-fenced NHS and Home Office grants. Locally some Council funding was also provided through Social Care and the Community Initiatives Team to support the Aquarius alcohol service. National NHS and local resources allocated for treatment services were consolidated for the tender. The public health grant included the NHS funding in the national allocation from 1 April 2013.
- 2.3 The contract formally commenced on 1 April 2013. However, following a statutory period of management of change with the workforce and subsequent recruitment, the new model of delivery went live on 1 August.
- 2.4 The model reflects a co-produced, local service specification which was based on national guidelines but widely consulted upon during 2011-12 with service users, the public, professionals and service providers.
- 2.5 NACRO's response provides for a culturally sensitive whole person and recovery focussed integrated system of care and treatment for: adult drug users, adult alcohol users, young substance users and those affected by familial misuse.
- 2.6 The development of a wider recovery community drawing on peer leaders, volunteers and also generic services. Specific links to housing, employment and training opportunities are also an integral part of the service delivery model.
- 2.7 Adult and young people's services are separate at the point of delivery. For young adults between the ages of 18-24 there will be a specific and targeted focus on transitional arrangements to socially reintegrate this group or towards onward, supported referral into adult services.

2.8 Services are designed to meet the needs of a wide range of drug/alcohol dependency issues and include a family focussed approach when engaging both young and adult service users.

2.9 A Single Point of Contact (SPoC) team acts as the gateway to all services.

3.0 Progress and Performance

3.1 Public Health England [PHE] estimates show that there are 2,135 opiate/crack users (OCUs) and 5264 dependent drinkers in Wolverhampton. Currently there are 1393 adults in effective drug treatment, 61 young people receiving treatment for addiction and 553 adults in alcohol treatment in Wolverhampton. National benchmarks are set around achieving successful outcomes for those in treatment.

3.2 Nationally validated performance feedback on drug and alcohol treatment from PHE is received quarterly and the summary from the latest release is as follows;

- In terms of breaking down the overall figure for Wolverhampton, when considered as a % of the whole treatment population, the successful completion rate of opiate and alcohol users has remained static. Clients being treated for non-opiate use have decreased. The partnership needs only to increase by an additional 10 clients to meet the cluster top performers but an additional 50 non-opiates would be required. The re-presentation rate needs some focused attention to ensure clients are not being pushed out of the system too quickly.
- The planned exit rates are behind the cluster top quartiles of 10-13% opiate users at 8.4% and 47 - 61% non opiate users at 36.4%.
- The local PHE and National Drug Treatment Monitoring Service teams are keen to support Wolverhampton to maintain data quality and high performance during the embedding of the new treatment system and providers. The on-going development of a recovery oriented treatment system, in which Wolverhampton has always been keen to invest, should drive visibly improved delivery for clients, families and the wider community.

3.3 The public health grant contains an element of funding based on successful discharges from drug treatment. Therefore the local contract includes a payment by results [PbR] indicator set based on successful discharges from treatment free from drugs and dependant alcohol use. A payment is also aligned to sustained outcomes at 28 days. At the six month review meeting on 9 October the service had yet to achieve the contracted performance anticipated year to date. There are a number of contributing factors and responses to this;

- The extensive management of change process to transform the workforce from around 100 to 70 staff and radical changes to the historical delivery model between April – July 2013, has delayed the implementation of a new data and

case management system. This has led to some initial gaps in recording as well as in delivery as staff transferred and then in some cases left the service.

- Data cleansing and staff training have since been implemented to address some of these issues but activity levels in year will be cumulatively affected by the initial transition period. To get a more accurate picture of the data and activity undertaken since the new model commenced in August public health has agreed with NACRO that quarter three data is presented as a stand-alone as well as a cumulative position. This is to clearly identify whether performance issues are related to delivery rather than the impact of establishing new systems and ways of working. Appropriate action will be taken once an accurate position has been established.

3.4 Despite the challenging issues for the service in relation to the transition period NACRO has been extremely responsive to the prominence of the safeguarding agenda in the City and has invested time and resources in developing integrated policy and guidance documents. A workforce training programme is being rolled out and an external quality assurance process around the children and families element of the model has been undertaken from which an action plan has been developed and is now being implemented.

3.5 A joint workforce event is also being held between the substance misuse service and the Council's children, young peoples and families service - Children In Need/Child Protection teams on 27 November to further develop joint working practice around vulnerable children and families with support needs arising from parental substance misuse.

3.6 NACRO and its partners now wish to formally launch the new branding for Wolverhampton Substance Misuse services and the new delivery model. A public event is being held at Dunstall Racecourse 10 am -12pm, 28 November and members of the Panel are invited to attend.

4.0 Financial implications

4.1 The contract value is £5.5 million per annum, subject to review. This is funded by the Public Health ring-fenced grant and the Police Crime Commissioner allocation to the Council. [AS/18102013/Q]

5.0 Legal implications

5.1 The new service is subject to contractual terms and conditions developed by the Council's Legal Team to ensure it meets the commercial requirements of the service going forward. [RB18102013/C]

6.0 Equalities implications

6.1 A 12 week, Tier 1 Statutory Public Consultation was undertaken during November 2011 - February 2012. An equality analysis is available as part of the consultation evaluation documentation.

7.0 Environmental implications

7.1 There are no direct environmental implications resulting from this report.

8.0 Schedule of background papers

REPORT TO THE CABINET (RESOURCES) PANEL - Substance Misuse Procurement Programme. Tuesday 21 February 2012

REPORT TO CABINET - Section 75 Agreement With Wolverhampton City PCT. Wednesday 11 April 2012.

REPORT TO HEALTH SCRUTINY PANEL - Wolverhampton Substance Misuse Services Consultation Findings. Thursday 12 April 2012.

REPORT TO THE CABINET (RESOURCES) PANEL - Substance Misuse Procurement Programme. Tuesday 27 November 2012

REPORT TO HEALTH SCRUTINY PANEL - Wolverhampton Substance Misuse Services Contract award and Mobilisation. Thursday 7 February 2013.