



Shared Services Joint Committee

Wednesday 16 August 2023

Item 6 – Recommissioning of Drug and Alcohol Treatment, Recovery and Support Services

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Drug and Alcohol Services Recommissioning

North and West Northants



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Council



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Scope of discussion

- Context
 - Northamptonshire's Substance Misuse Needs Assessment
 - Current Commissioning Picture Service Model
 - National Strategy and additional Funding
- Commissioning Options Appraisal
- Recommendation
- Questions and Comments



Substance Misuse Needs Assessment 2022 Summary



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Overall Trends

Alcohol

- Both nationally and locally, **alcohol consumption** in children and **young people** has been **declining** (though those aged 16-24 remain the most likely to binge drink)
- Related to this, locally hospital admissions in <18's specific to alcohol have declined over the last decade (¾ of these hospital admissions are among girls)
- There has also been a decline in total alcohol consumption among adults nationally, though harmful drinking and deaths due to alcohol have **not** seen a corresponding decline

Drugs

- Nationally, over the last decade, overall **drug use** has been **increasing** in **young people** aged 16-24
- Hospital admissions due to substance misuse in Northamptonshire (both West and North) are significantly higher than England among 15-24 year olds
- In Northamptonshire - in line with national trends - the death rate from drug misuse has risen in Northamptonshire over the last decade.

Impact on society

NHS Impacts:

Substance misuse has a considerable impact on the use of NHS services. In the last year in Northamptonshire (Aug 21 – Jul 22) substance misuse was involved in

- 20k attendances at urgent care
- This involved around 6.4k individuals
- 3.5k hospital admissions
- Cost of urgent care was £3million

Many urgent care attendances related to injuries – 56% are accidental, 1 in 4 involve self harm and a further 15% are assaults.

Admissions peak in in those aged 50-54.

Crime

2,057 drug related offences in Northamptonshire in year till June 2022. Drug offences have risen in the last year.

Carers

53 registered carers in Northamptonshire primarily related to substance misuse. This is likely to be an underestimate

Employment

32% of those entering substance misuse treatment were in regular employment in 2020-21. Local employment rates of those in treatment have been better than England

Housing

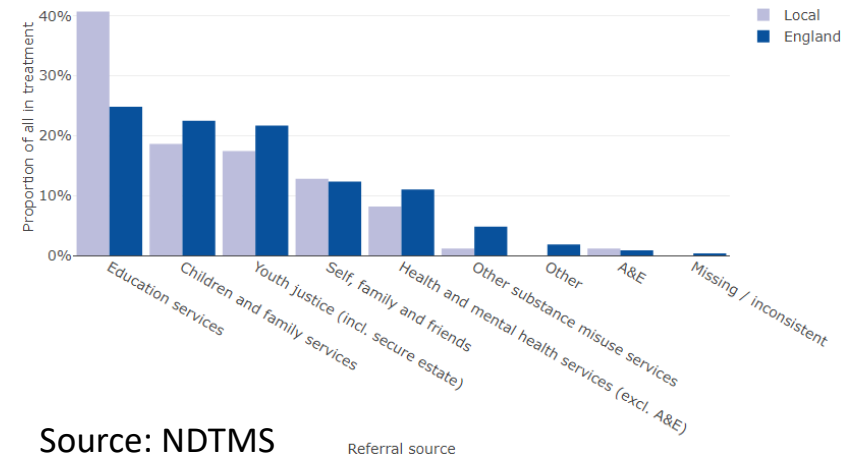
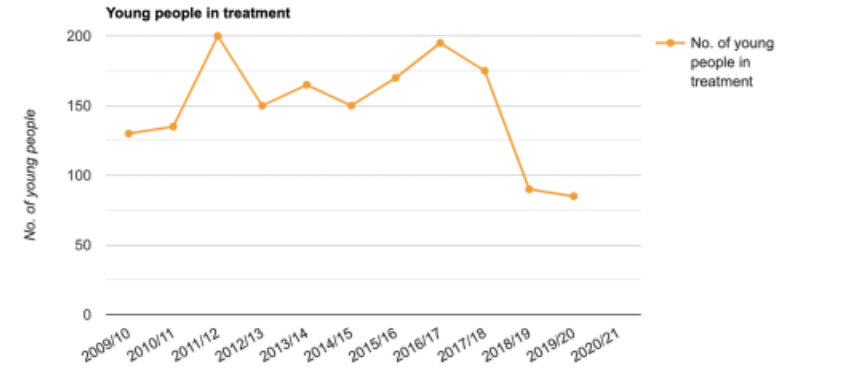
10% of those entering substance misuse treatment had an urgent housing need in Northamptonshire in 2020-21 - higher than in England

Treatment services – young people’s services

In 2020-21, 89 young people were in treatment. Compared to England, **referrals in Northamptonshire are much more likely to come from education than other sources.** In 2020-21,

- Most common substances - cannabis (94%), alcohol (41%) or cocaine (17%), in line with national pattern
- 2/3rd of those in treatment were male.
- 84% were white British.
- Peak age is 14-15 (46%)

Numbers accessing services have fallen in recent years: largest fall has been in older teens.



Source: NDTMS

Referral source

Treatment services – young people’s services

Outcomes in 2020-21 were similar to England rate

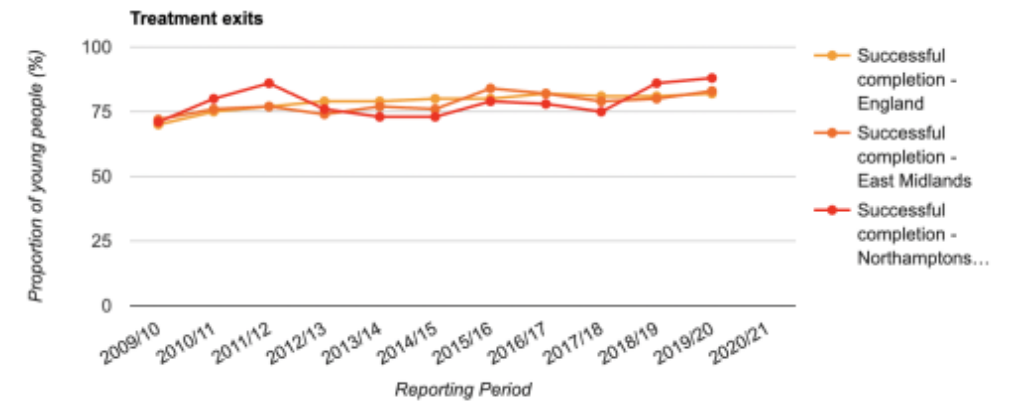
81% of exits recorded as successful completion. No representations within 6 months.

- Rates have been similar for a decade.
- Low levels of harm reduction and smoking cessation recorded in service.
- Time in treatment slightly longer than the England average.

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More recently and particularly in 2022, there has been a large increase in complex cases and the profile of substance misuse has changed.

Trends in successful completions in young people’s services



Source: NDTMS



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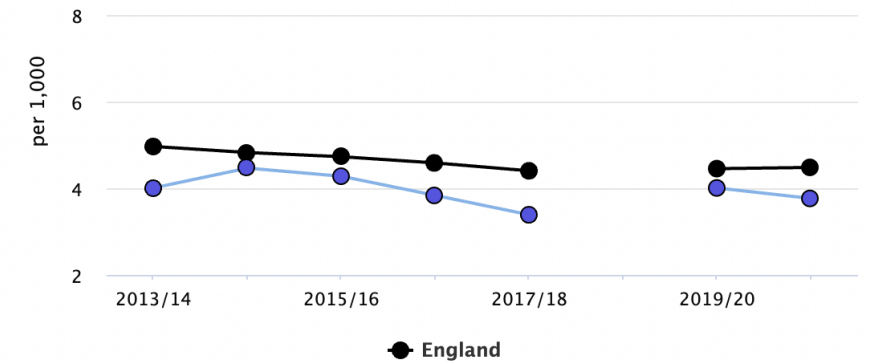
Treatment services – adult services

In 2020-21, 3,165 adults were in treatment for substance misuse and 1,590 were new presentations in Northamptonshire. It is estimated that 49% of opiate or crack users are currently accessing treatment in Northamptonshire but only 20% of people who are alcohol dependent are in treatment.

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- **The adult drug treatment rate is lower than England but higher to similar areas (CIPFA). Little change over time.**
- Age, sex, LGBT and religious profile mirror the national average.
- Cohort of service users is ageing, fewer young people are entering the service and more over 50's.
- Low rate access for disabilities - 18% locally compared to 28% in England and few ethnic minorities

Adults in specialist drug misuse services



Recent trend: ➔ No significant change

Treatment services – adult services

Local profile of substances used is similar to England and has followed the same trends.

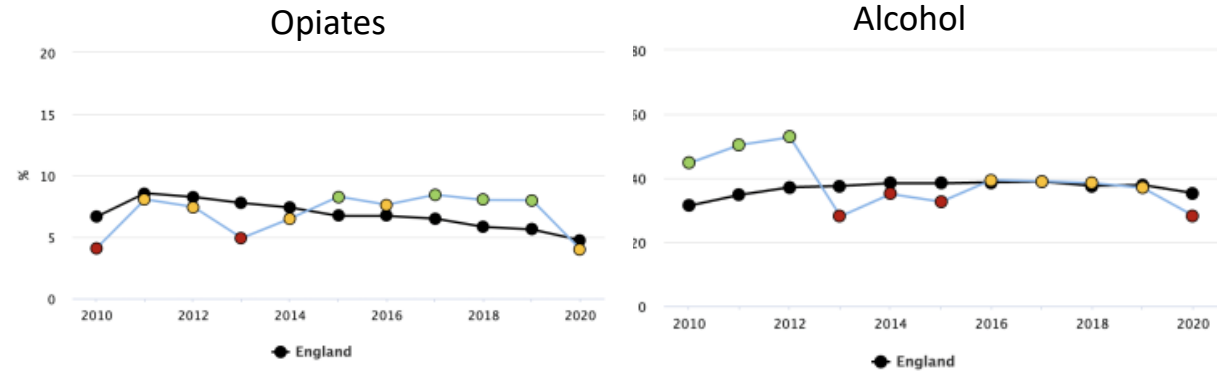
More reliance on self referral to substance misuse treatment services and referrals from the CJS

- Comparatively few referrals are from health and social care - 4% locally vs and 15% in England in 2020-21
- Rates of adults engaging in treatment following prison release are significantly higher than England.

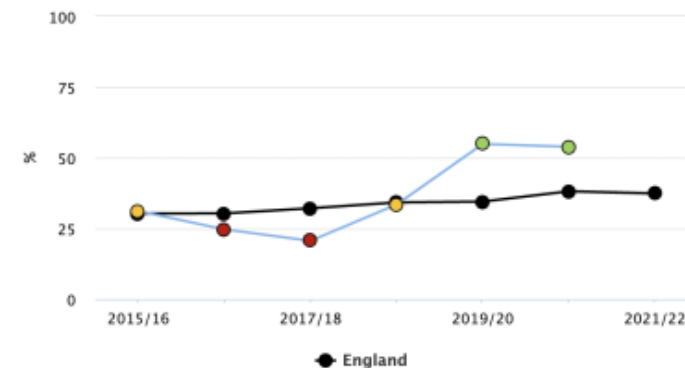
Most adult treatment outcome are comparable or better than England

- Including housing and employment
- Harm reduction outcomes (hep B & C) and naxolone provision

Successful completion of treatment in Northamptonshire



Adults successfully engaging in treatment following release from prison



Source: OHID Fingertips

Recommendations Summary

- More joined-up services (particularly with mental health services) but also wider primary and secondary care (for earlier identification) and criminal justice
- More visibility of services and clear pathways
- More capacity to deal with increasing complexity
- Understand more about under-served communities (rural, BAME etc.)
- Address transition/ provide dedicated services for young adults
- Continue to build on harm reduction successes

Northamptonshire Current Commissioning Picture and Service Offer



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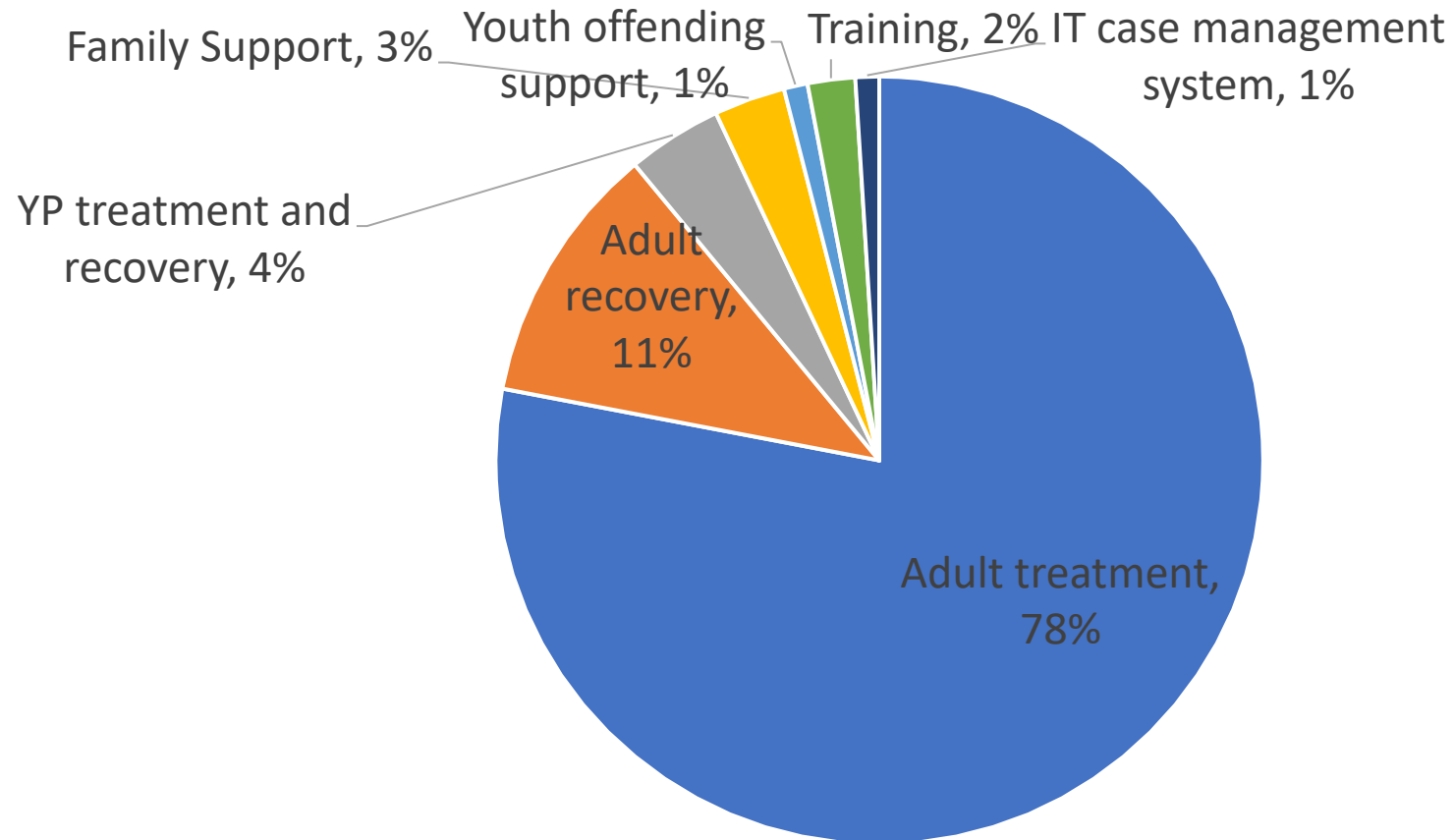
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Background

- The lead responsibility for commissioning drug and alcohol treatment and support services rest with local authorities.
- Investment into treatment and support services is through the public health grant.
- The commissioning for drugs and alcohol treatment and support services is led by the West Northants on behalf of both Northamptonshire Councils.
- There are seven service contracts in total, with an annual spend of £7.09m.



Current Core Spend



Total spend
£7.091 million



Contract	Provider	Service Delivery
Adult Treatment Service	Substance 2 Solution by Change Grow Live (CGL)	<ul style="list-style-type: none"> • Single point of access to all drug and alcohol support and triage assessment • Structured psychosocial intervention (including CBT, counselling and therapy) • Specialist Community Prescribing service (including for opioid substitution therapy) • Inpatient detoxification and residential rehabilitation • Close collaboration with criminal justice system: courts, prisons and probation • Harm reduction (including needle exchange and naloxone provision) • Wellingborough, Corby, Kettering
Young People's Treatment Service 2016	NGAGE (Aquarius)	<ul style="list-style-type: none"> • Structured Treatment Service - offering psychosocial interventions • Comprehensive range of engagement, diversion and education activities • Co-ordination with partners, importantly - transitions to the adult services and co-ordination with Family Link service • Wellingborough, Corby, Kettering and East Northamptonshire
Recovery Service	The Bridge	<ul style="list-style-type: none"> • Peer-led recovery support service based in Northampton, Wellingborough and Corby. • PHASE Housing (delivered in partnership with a housing association) to provide suitable accommodation for recovery

Contract	Provider	Service Delivery
Family Support Service	Family Support Link	<ul style="list-style-type: none"> • Support, counselling, education and early intervention for families affected by a member's drug or alcohol use • Development of peer mentors as well as volunteer-led support groups • Northamptonshire Service
Drugs and Alcohol Training Page 17	Aquarius Healthy Futures	<ul style="list-style-type: none"> • Free training for front line staff, carers or professionals to cover alcohol and drug use awareness as well as specific training on brief interventions for key target staff groups
Case management system	Illy Systems	<ul style="list-style-type: none"> • Case Management delivery and maintenance
Drug and Alcohol treatment in the Youth Offending Service (YOS)	Children's Trust - Youth Offending Service	<ul style="list-style-type: none"> • Free training for front line staff, carers or professionals to cover alcohol and drug use awareness as well as specific training on brief interventions for key target staff groups

National Strategy and Northamptonshire's response to delivery



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National Strategy and Grants

- A new national strategy for drugs 'From Harm to Hope' was launched in December 2021 and identifies 3 strategic priorities, these are:
 - Break drug supply chains
 - Deliver a world class treatment and recovery system
 - Achieve a generational shift in demand in drugs
- The strategy recognises the importance of a system wide approach and strong partnerships in tackling substance misuse at national and local levels.
- Requirement that each local area develops a '**Combating Drugs Partnership**'
- Nationally, the government are investing nearly **£900 million to support delivery** of this strategy

Northamptonshire Combating Drugs Partnership

- Chaired alternate years by the Directors of Public Health in West and North Northamptonshire Councils, the CDP meet quarterly
- Needs assessment and strategy completed by end 2022 that address the three priorities of the national strategy
- Key partner organisations (some listed below) have ownership of different elements of strategy delivery.
- A local outcomes framework has been designed to follow the national outcomes framework so that we can monitor progress

In partnership with



Grants to support strategy delivery

- Substance Misuse Treatment and Recovery Grant (SSMTRG)
Focus is on improvement in health outcomes and reducing deaths related to drugs and alcohol by encouraging more people to enter treatment and improving continuity and quality of care.
- SSMTRG Housing Support Grant (HSG)
Focus is on reducing the rate of treatment “drop-out” for people with a housing need; improve access to treatment for those who don’t have stable accommodation and improve access to stable accommodation for those who need treatment.
- (for West only) Rough Sleeper Grant (RSTARG)
Focus is on improving drug and alcohol treatment outcomes for rough sleepers with two main areas of focus: wrap-around support and improvement of community treatment offer.



Grants to support strategy delivery

	2023/24 Grant Value		
	North	West	Total
Substance Misuse Treatment and Recovery Grant (SSMTRG)	£663,700	£701,937	£1,365,637
Housing Support Grant (HSG)	£290,026	£306,735	£596,761
Rough Sleeper Grant (RSTARG)		£811,209	

Recommissioning Options Appraisal

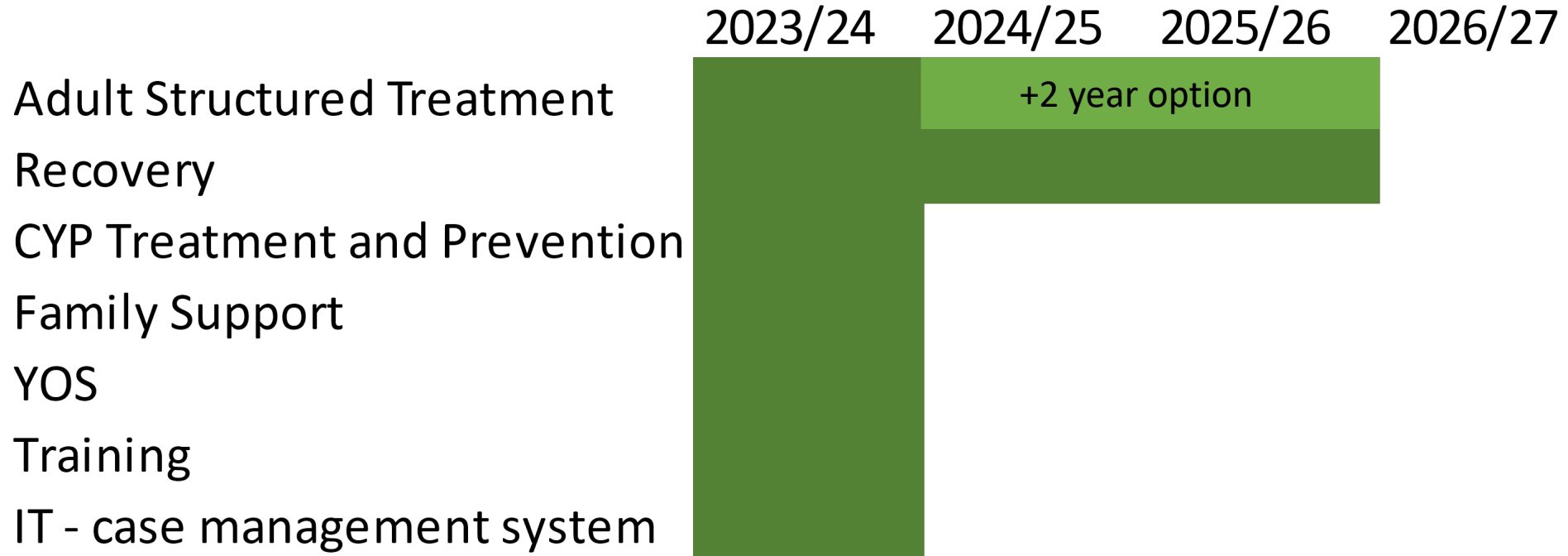


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Contract durations



Commissioning Options

Option 1: To re-commission drug and alcohol treatment provision (excluding recovery services) for 1st April 2024.

Option 2: To align treatment and recovery service contracts to re-commission together for 1st April 2026 (***preferred Option***)

The preferred option allows the alignment of all drug and alcohol services to 1st April 2026. This option presents greater opportunities for delivering a holistic and effective service offer that meets the needs of North and West Northamptonshire councils' local residents.

Option 1

Option Appraisal

Advantages

Disadvantages

Option 1:

To recommission drug and alcohol treatment provision (excluding recovery services) for 1st April 2024.

- Opportunity to use contractual arrangement to deliver changes to the adult's treatment services to better meet needs of the population.
- Encourages competition which could drive quality standards and value for money.

- Does not allow us to develop a holistic prevention, treatment and recovery model (recovery service is excluded)
- The procurement process will be highly disruptive to both providers and service users.
- Will also affect delivery of adults treatment projects supported by supplementary grants.

Option 2

Option Appraisal Advantages

Disadvantages

Option 2:

To align treatment and recovery contracts and recommission together for 1st

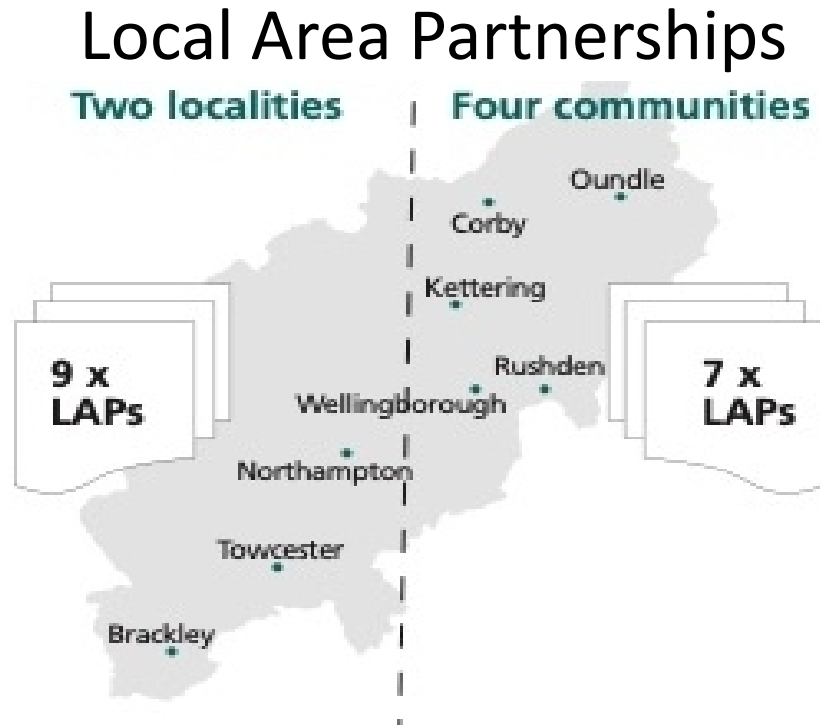
April 2026

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- Allows us to shape a holistic model for adults and young people from 2026; a new model that supports emerging landscape of children's and adults including Local Area Partnerships, Family Hubs and youth offer.
- Stability of adult's treatment service offers greater opportunity to continue working collaboratively to deliver further improvements and deliver continuity of care for service users.
- Time for meaningful co-production, with those with lived experience, families, carers, professional networks in designing the new model.
- Time to explore joint commissioning across areas of mental health, criminal justice, employment support, housing, primary and secondary care, to explore differential needs requirements of North and West Northamptonshire and options that deliver greater value for money.
- Consider the future decision from the OHID regarding the Drug & Alcohol Grant Programmes.

- Adult treatment service improvements will rely on cooperation of provider (working closely with incumbent to ensure this)
- This may limit the opportunity for introducing new approaches and innovative practices in adult treatment, with a risk that focus is on delivering KPIs using existing delivery models.

New landscape emerging



- Community Hubs
 - Family Hubs
 - Youth Offer
- Etc.



Vision for 2026

- A commissioning model and service delivery model/specification that:
 - Ensures a seamless service offer for all residents
 - Recognises and meets the different needs of West and North as well as particular underserved groups
 - Fosters a collaborative partnership approach between providers
 - Integrates with existing (e.g. MH services) and new service offers (e.g. Family Hubs) across the county
 - Appropriately balances investment in increasing complexity and acuity of need of those in treatment and prevention



Recommendations -Report

It is recommended that the Shared Services Joint Committee consider and approve the alignment of all substance misuse contracts up to 31st March 2026, which will entail:

Utilising the existing extension within the Adults Structured Treatment Service contract from 1st April 2024 to 31st March 2026.

- Continue to explore expression of interest to award the contract for the Case Management System to the incumbent provider, from 1st April 2024 to 31st March 2026.
- Recommissioning the Family Support Service, Children and Young People's Prevention and Treatment Services, and the Youth Offending Service offer from 1st April 2024 to 31st March 2026 through a competitive process.
- Awarding the contract for Workforce Training via a negotiated procedure, due to an absence of alternative providers being identified through the expression of interest

Next Steps

	Key Actions
1	Undertake a comprehensive programme of remodelling prevention, treatment and recovery services for children and adult services. To ensure key milestones and timeframes will be met by commissioners for contracts starting in 2026
2	Re-commission of the smaller contracts listed below to commence 1 st April 2024, and the procurement process will be as follows: <ul style="list-style-type: none">• <i>Young People’s Prevention and Treatment Services (via expression of interest)</i>• <i>Family Support Services(via expression of interest)</i>• <i>Workforce Training (via expression of interest)</i>• <i>Support for Youth Offending Service (via expression of interest)</i>• <i>Case Management System (completive tendering process)</i>
3	Continue to explore utilising a compliant government framework to award the contract for the Case Management System to the incumbent provider, should new requirements be met, from 1 st April 2024 to 31 st March 2026.
4	Award the contract for Workforce Training via a negotiated procedure, due to an absence of alternative providers being identified through the expression of interest from 1 st April 2024 to 31 st March 2026.

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