

Item No: 7

Meeting Date: Wednesday 15 February 2017

Glasgow City Integration Joint Board

Report By: Susanne Millar, Chief Officer Planning, Strategy &

Commissioning / Chief Social Work Officer

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ADULT SERVICES FINANCIAL PLANNING FOR 2017/18 - ALCOHOL AND DRUGS

Purpose of Report:	To seek approval for the streamlining of services in two distinct service areas, firstly to redesign the current Alcohol and Drugs Service to a single location, and secondly to move to tender for a redesigned Alcohol and Drugs Prevention and Education Service.
Recommendations:	The Integration Joint Board is asked to: a) approve the proposals outlined in this report; and, b) direct the Health Board to develop and redesign services as outlined in this report

Implications for Integration Joint Board:

Financial:	£131k savings will be realised in 2017/18 from these proposals, with a full year effect of £350k across both provisions in 2018/19.
Personnel:	Reduction in workforce and change in work patterns/locations (Day Services). Full engagement with Trade Unions and Staffside Partnership will be progressed as appropriate, and it is proposed that Addiction nursing vacancies are held or only recruited to on a temporary basis to facilitate the moves required.

Legal:	None

Economic Impact:	None	
Sustainability:	None	
Sustainable Procurement and Article 19:	None	
Equalities:	None	
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Risk Implications:	Day Services	
	 No risks in relation to adopting one service delivery mode. Moving the Day Service from Eriskay House, Stobhill to one site model at Gartnavel will increase travelling time some patients due to greater distance. It is anticipated patients in North East Glasgow will be the most affect however the impact will be mitigated by the asser outreach nature of the new service delivery model which see Day Service interventions being delivered from a rai of venues in localities across Glasgow. It will specific target areas within the catchment for Eriskay to alleviate a detriment. Prevention & Education No risk for the HSCP as Review of Service identified number of areas of duplication and poor performance. No Service Model provides greater efficiencies and better various for money 	o a for that ted, tive will nge ally any
Implications for Glasgow City Council:	None	
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Implications for NHS Greater Glasgow & Clyde:	Staff work patterns and change of location (Day Services only)	
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Direction Required to	Direction to:	
Council, Health Board or Both	No Direction Required Glasgow City Council	
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1. Purpose

1.1 To seek approval for the streamlining of services in two distinct service areas, firstly to redesign the current Alcohol and Drugs Service to a single location, and secondly to move to tender for a redesigned Alcohol and Drugs Prevention and Education Service.

2. Day Services

2.1 Current day service delivery is across two sites in Glasgow; Kershaw Unit at Gartnavel and Eriskay Unit at Stobhill. Services deliver treatment to the most complex and vulnerable people with alcohol and/or drug issues, mental and physical health co-morbidity. The criteria for referral to Day Service provision focuses on patients who require clinical support that cannot be delivered safely in the community.

Multi-disciplinary teams consisting of nurses, psychiatrists, occupational therapists, dieticians provide a service for people with complex needs who cannot be treated in the community and provides a clear pathway from Inpatient care to Community Addiction Teams (CATs) that includes detoxification, supervision of medication, review of mental health assessments, relapse prevention and group work.

2.2 The Clinical Services Review for Alcohol and Drug Services tasked a sub-group to review Day Service provision across Greater Glasgow and Clyde and a sub group to review Inpatient Services. This review concluded that a realignment of the services will meet the strategic objectives of the National Drugs Strategy, the Alcohol and Drug Partnership, The Road to Recovery and The Plan for Action on Alcohol improving links with local communities and their services, and will provide better use of resources and realize financial efficiencies.

In relation to the current services it concluded the following:

Practice

Current practice across sites is inconsistent. A single model will improve consistency in the delivery of services. Community Alcohol & Drug Services have been re-designed with a much greater focus on recovery oriented treatment and care. The new Day Service model will see much closer working with Community Addiction Teams (CATs), Recovery Hubs and Recovery Communities.

Attendance

Current attendance is low in the afternoons and at the weekends which does not make best use of finite resources. The service does not currently have an outreach service.

Integration

Better links and communication between these services and Community Addiction Teams and other community services needs to be more robust.

More effective integration between inpatient and day services and community based provision will enable Day Service outreach staff to better support the return to community alcohol and drug services through joint visits, linking patients into Recovery Hubs, third sector community services and Recovery Communities.

2.3 The review of Day Services has therefore provided an opportunity to streamline the service and create efficiencies without significant impact on patient care.

A single site Day Service will provide an opportunity to ensure that practice is improved, which will lead to greater consistency for patients accessing the service.

Services will deliver a 12 week core programme that includes supervision of medication, review of mental health assessments, relapse prevention, group work and occupational therapy, with close interface to Recovery Hubs and Recovery Communities.

All patients attending the Day Service will be aligned to the CATs in localities, to ensure that access to Tier 4 services is consistent across Greater Glasgow.

The service will focus on the transition from Inpatient stay to the community, and provide a more intensive service to patients in the community, ensuring regular contact, support and risk management.

2.4 The benefits of a single site model with outreach will provide localised services within communities reducing inequalities to treatment and care, whilst improving access with other health and social care services, Recovery Hubs and Recover communities.

3. Prevention & Education Services

- 3.1 NHS Greater Glasgow and Clyde, on behalf of the Alcohol and Drug Partnership (ADP), commissioned two city wide alcohol and drug prevention and education services in 2015 for 2 years. One was a service for children, young people and families focused within education and community settings, the other a service for communities focused on adults and older people within distinct geographies.
- 3.2 During 2016 an internal review has been carried out by HSCP contract managers in conjunction with NHS Greater Glasgow & Clyde Procurement, ahead of the end of the contracts for these services. The review highlighted a number of contract performance issues including:
 - A duplication of substantial amounts of support required from health improvement staff in order to ensure that key outcomes regarding the two services have been achieved.
 - Gaps in delivery, with key delivery outcomes not evidenced, e.g. capacity building for education staff.
- 3.3 Moreover, in a strategic context, the landscape has changed significantly since the contracts were put in place in 2015 in terms of priority areas of work within the alcohol and drugs citywide provision. There has been significant financial investment made in the city to support targeted work around alcohol and older people through the Big Lottery Fund, which covers elements of the activity contained within the communities' contract, this activity will continue for at least the next two years.

- 3.4 Given the issues in the current services and the changes in the wider context, it is therefore proposed a new tender is progressed with the future provision being focused on a single service delivering the following:
 - Alcohol & Drugs Training Lead on and deliver Alcohol & Drugs training across Glasgow to include Youth Work training for trainers, Alcohol & Drugs Awareness training for staff working in communities, development of general and multiple risk teacher training (alcohol, drugs & tobacco), CPD in schools.
 - Alcohol Brief Interventions (ABI) Delivery of ABI training for trainers and ABI training across Glasgow. This will also include delivery of Fast Alcohol Screening Tests and ABIs in wider settings, establishment of an ABI trainer's network, development of resources, monitoring of data for submission to Greater Glasgow and Clyde NHS.
 - Multiple Risk Programme in Schools, Youth Settings, Colleges and Universities and Support Services for Children & Young People -Development and direct delivery of multiple risk programme for Secondary Schools, youth settings, colleges and universities to include alcohol, drugs & tobacco. Delivery of existing programmes, e.g. Young Booze Busters programme in Primary Schools (P6/7). Development of new services to support vulnerable children and young people at risk from their own alcohol or drug use.

4. Recommendations

- 4.1 The Integration Joint Board is asked to:
 - a) approve the proposals outlined in this report; and,
 - b) direct the Health Board to develop or redesign services as outlined in this report.



DIRECTION FROM THE GLASGOW CITY INTEGRATION JOINT BOARD

1	Reference number	150217-7-a
2	Date direction issued by Integration Joint Board	15 th February 2017
3	Date from which direction takes effect	15 th February 2017
4	Direction to:	NHS Greater Glasgow and Clyde only
5	Does this direction supersede, amend or cancel a previous direction – if yes, include the reference number(s)	No
6	Functions covered by direction	All functions associated with the provision of Alcohol and Drug Day Services
7	Full text of direction	NHS Greater Glasgow and Clyde are directed to implement the redesign of Alcohol and Drug Day Services as outlined in this report
8	Budget allocated by Integration Joint Board to carry out direction	As advised by the Chief Officer: Finance and Resources
9	Performance monitoring arrangements	In line with the agreed Performance Management Framework of the Glasgow City Integration Joint Board and the Glasgow City Health and Social Care Partnership.
10	Date direction will be reviewed	15 th February 2018