

7 October 2019

Agenda Item: 6

REPORT OF THE DIRECTOR OF PUBLIC HEALTH**SUBSTANCE MISUSE SERVICE AND NEW PSYCHOACTIVE SUBSTANCES
(NPS)****Purpose of the Report**

1. To inform the Adult Social Care and Public Health Committee of the successfully procured provider who will deliver the All Age Substance Misuse Treatment and Recovery Service for Nottinghamshire and to give an overview of the new service model.
2. To update the Adult Social Care and Public Health Committee on the number of referrals into the substance misuse treatment and recovery service where New Psychoactive Substances (NPS) is identified as an issue and what action is being taken to address NPS use in Nottinghamshire.

Information**The new All Age Substance Misuse Treatment and Recovery Service**

3. Substance Misuse is the harmful use of substances like drugs or alcohol and is associated with a wide range of physical and mental health issues as well as broader social issues including homelessness, unemployment, criminal activity and anti-social behaviour. The financial costs of alcohol related harm to society nationally is £21.5 billion and the cost of illicit drug misuse is £10.7 billion. For Nottinghamshire, the costs are estimated to be £31.8 million each year for alcohol related harm and £15.8 million for illicit drug misuse.
4. Addressing substance misuse is therefore a key national priority. [The National Drug Strategy 2016](#) continues to promote sustained recovery from drug misuse and acknowledges the importance of a whole life approach with a focus on education and prevention. [The National Alcohol Strategy 2012](#) focusses on reducing the number of people drinking excessively and making 'less risky' drinking the norm. In Nottinghamshire, the Substance Misuse Strategy Group delivers on a Framework for Action (2018-2021) which addresses both drug and alcohol concerns.
5. The Nottinghamshire Joint Strategic Needs Assessment on Substance Misuse (November 2018) modelled estimates highlight that there are approximately 172,725 Nottinghamshire residents who would benefit from a substance misuse intervention because they misuse substances frequently and an estimated 26,068 dependent on substances (4,436 dependent opiate and/or crack users and 21,632 dependent on alcohol). Therefore, it is in fact Alcohol which represents the greatest need. For young people specifically, it is estimated that 665

10-17 year olds are misusing drugs and 5,114 young people are drinking at increasing and higher risk levels. These figures are likely to be under-estimates due to the hidden nature of some substance misuse.

6. The newly published consultation for the Prevention Green Paper - *Advancing our Health: prevention in the 2020's* discusses the challenges with alcohol consumption and drug use within the population. There are some proposed actions around 'nudging' the general drinking populations towards lower strength alcohol products and to increase the availability of alcohol-free and low-alcohol products by 2025. In addition, the Home Office and the Department of Health and Social Care are to work closely to undertake further policy developments around the issues related to prescribed and illicit opioid use.

Current substance misuse services in Nottinghamshire

7. In Nottinghamshire there are currently three separate services which support residents and families with substance misuse issues. These services are:
 - a. A community adult substance misuse service - Provided by Change, Grow, Live (CGL).
 - b. A community young people (YP) substance misuse service - Provided by CGL.
 - c. What About Me (WAM) which supports children and young people whose parents misuse substances - Provided by Nottinghamshire Health Care Trust.
8. The current adult substance misuse contract is co-commissioned by Nottinghamshire County Council (NCC) and the Police and Crime Commissioner (PCC), with the PCC contributing £318,916 (3.7% of the total contract value). As well as working alongside the PCC as co-commissioners, NCC substance misuse commissioners are also working closely with corporate colleagues to ensure existing links with adult and children's social care services are maintained and strengthened through the new service provision.
9. Nottinghamshire substance misuse services are open to anyone who wishes to access substance misuse support. In 2017/2018 the adult substance misuse service supported 13,668 adults. Since October 2018 when CGL took over the young people substance misuse service 329 young people have been supported (data only available up until April 2019). All of the above-mentioned contracts in paragraph 7 expire on the 31st March 2020.
10. In October 2018 the Adult Social Care and Public Health Committee agreed that:
 - Procurement could take place for a new model of an All Age Substance Misuse Treatment and Recovery Service which combined all 3 separate services.
 - A competitive dialogue approach would be used for the procurement process.
 - Contract length would be up to 8 years with a contract start date of 1st April 2020 (service mobilisation starting from 1st October 2019).
11. In November 2018, the Director of Public Health and the Police and Crime Commissioner agreed that the All Age Substance Misuse Treatment and Recovery Service would again be co-commissioned, with the PCC maintaining the same financial value (see paragraph 8) as previously allocated to the Adult Substance Misuse Service. NCC Public Health invests £8,570,135 per year for the All Age Substance Misuse Treatment and Recovery Service.

The New All Age Substance Misuse Service Model Provider

12. Through the completion of a successful competitive dialogue procurement process to tender for the All Age Substance Misuse Treatment and Recovery Service, the successful provider is Change, Grow, Live (CGL). CGL have considerable experience delivering both adult and young people's substance misuse services nationally and are the incumbent provider within Nottinghamshire. CGL took on responsibilities for the Young People Substance Misuse Service in October 2018. Therefore, there is a high level of assurance that during the mobilisation period the remaining WAM service will be safely incorporated into the All Age Substance Misuse Treatment and Recovery Service.
13. CGL will be responsible for the whole substance misuse pathway and have incorporated a family-based model, as specified in the tender, to support all individuals recover from their substance misuse. The new vision for the service will be to not only support individuals but to tackle inter-generational substance misuse through a family-based approach. However, it is worth noting that even though it will be one service commissioned there will be different age-appropriate interventions for both adults and young people. Appendix 1 shows a diagrammatic representation of CGL's new service model.
14. The rationale for taking an all age approach are:
 - Consistent emphasis on recovery across all ages of those accessing the substance misuse services.
 - Improve transition arrangements from young person into adult substance misuse services which are more person-centred and integrated. Transition will take place when the young person is ready to transition into an adult provision rather than when they reach their 18th birthday.
 - Ability to track and keep in touch with young people who have previously accessed young people substance misuse service as they become adults.
 - Enables assessment and co-ordination of intergenerational and whole family substance misuse support.
 - Easier for professionals to refer into one service particularly if a family approach to tackling substance misuse is required.
 - Consolidation into a single service creates potential for service efficiencies, and improved consistency of approach to quality, clinical governance and supervision arrangements.
 - A focus on prevention and early intervention with an emphasis on young people to prevent substance misuse into adulthood.
15. During the mobilisation period lasting from the 1st October 2019 until the end of March 2020, officers and the provider will define overarching service outcomes and key performance indicators. These may evolve further over the lifetime of the contract, to reflect newly emerging needs and national substance misuse policy direction. From April 2020, performance reporting of the All Age Substance Misuse Treatment and Recovery Service will be included within the routine public health monitoring to Adult Social Care and Public Health Committee. Notwithstanding the changes which will be required, officers are confident that CGL will maintain the same consistently high level of performance on the new contract as they have been delivering on the existing contract.

Reasons for Recommendation

16. A rigorous procurement process has been conducted using competitive dialogue involving a total of five bidders, which has resulted in CGL being the successful provider.

New Psychoactive Substances (NPS)

17. At the ASCPH committee on the 1st April 2019 an initial report was presented on the background and current situation of NPS use in Nottinghamshire and it was agreed that an update report would be brought back to Committee in six months time.
18. Change, Grow Live (CGL) are the current provider of the Nottinghamshire Substance Misuse Treatment and Recovery Service, and as such are supporting individuals who are using NPS problematically as well as providing a treatment and recovery service for all residents of Nottinghamshire who wish to engage for their substance misuse.

Nottinghamshire Referral Data for NPS

19. In 2018/2019 CGL supported 211 individuals for NPS use (see Appendix 2, Table 1) and while this is an increase in numbers presenting to service from the previous year it needs to be set within the context of the service supporting a total of 13,168 unique individuals receiving substance misuse treatment within the same time period. Therefore, NPS use reflects just 1.6% of the total number of Nottinghamshire residents receiving substance misuse treatment and support.
20. There is however one key limitation to this data. The data used to determine the size of the local NPS problem described above is "*Number of referrals received, where NPS is listed as Drug 1, 2 3 & Other drug*". Therefore, while this data gives an overall picture of how NPS are being used by all clients in contact with CGL, it doesn't reflect the frequency nor intensity of NPS use. Thus, some of the data captured may be where a client has reported just a single use of NPS.
21. Therefore, it is prudent to look at data where NPS is listed a "Drug 1", which means that NPS is the individual's primary drug of choice, such data is shown in Table 2 within Appendix 2 and shows that there has only been a slight increase from 46 individuals within the treatment service using NPS in 2017/2018 to 54 individuals in 2018/2019.

What is happening currently to address this issue locally?

22. In the 2018/2019 financial year funding was allocated by the Office of the Police and Crime Commissioner (OPCC) specifically for vulnerable adults who were misusing NPS and to encourage them to engage with treatment. With the allocated funds, CGL implemented assertive outreach work and have been able to work proactively in community settings (often on the streets in most cases) with a larger number of highly vulnerable and often chaotic NPS users to bring them into treatment services.
23. As part of the successful bid to the Ministry of Housing, Communities and Local Government (MHCLG) Rough Sleeping Initiative (RSI), CGL are continuing to deliver substance misuse assertive outreach in 2019/20. Funding for the continuation, and now expansion, of the assertive outreach approach was agreed from the Substance Misuse Strategy Group and

utilised partnership monies under a Section 256 agreement. As part of the RSI delivery model, there are now four assertive outreach workers in total covering Ashfield, Mansfield, Bassetlaw (Worksop) and Newark / South area working with vulnerable adults and bringing them into treatment. Appendix 2 demonstrates that CGL are mostly supporting individuals who use NPS in those Districts where NPS use has previously been most visible (Mansfield and Bassetlaw).

Reasons for Recommendation

24. At Nottinghamshire County Council Full Council meeting on the 20th September 2018 it was agreed that a report would be brought to ASCPH to update members on numbers of referrals into substance misuse treatment and recovery service, where NPS is identified as an issue. On receiving such a report at the 1st April ASCPH committee, it was agreed a further six-month progress report would be presented to update members on NPS use within Nottinghamshire.

Statutory and Policy Implications

25. This report has been compiled after consideration of implications in respect of crime and disorder, data protection and information governance finance, human resources, human rights, the NHS Constitution (public health services), the public sector equality duty, safeguarding of children and adults at risk, service users, smarter working, sustainability and the environment and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

Crime and Disorder Implications

26. The links between substance misuse and the criminal justice system have been considered. The PCC is a member of NCC Public Health's strategic commissioning advisory group. NCC Public Health intend to commission a substance misuse service for all residents that is inclusive of the criminal justice pathway.

Financial Implications

27. The current NCC Public Health investment is £8,570,135 per year. The substance misuse contract will be funded from the Public Health Grant, within the budget envelope that is available for this service. If the PH Grant changes, the substance misuse service will keep to the budget envelope that is affordable for this service.

Human Resources Implications

28. There are no HR implications as this is a commissioned service.

Human Rights Implications

29. No known human rights implications, service functions will still be provided and available to the communities across the County.

Implications in relation to the NHS Constitution

30. No known NHS Constitutional implications. Further conversations are taking place with NHS Stakeholders across the County.

Public Sector Equality Duty implications

31. Nottinghamshire County Council have considered the equality implications of the consultations reach and completed an Equality Impact Assessment on the process. The document has been uploaded onto the Council's publicised page.

<http://www.nottinghamshire.gov.uk/jobs-and-working/equality/completed-equality-impact-assessments-eqias>

Smarter Working Implications

32. No smarter working implications.

Safeguarding of Children and Adults at Risk Implications

33. No additional safeguarding implications.

Implications for Service Users

34. Service users will receive a new service offer which is integrated and coordinated. This should improve the information and support available to residents across the county.

Implications for Sustainability and the Environment

35. The service model is working within local communities, responding directly to communities needs which will be more sustainable long term.

RECOMMENDATION/S

It is recommended that the Adult Social Care and Public Health Committee:

- 1) That members agree to receive a follow up report regarding the implementation of the All Age Substance Misuse Treatment and Recovery Service for Nottinghamshire in October 2020, which includes NPS information, and that this be included in the work programme.

Jonathan Gribbin
Director of Public Health

For any enquiries about this report please contact:

Sarah Quilty, Senior Public Health and Commissioning Manager
Amanda Fletcher, Consultant in Public Health

Constitutional Comments (EP 05/09/2019)

36. The Adult Social Care and Public Health Committee is the appropriate body to consider the contents of the report. If Committee resolves that any actions are required, it must be satisfied that such actions are within the Committee's terms of reference.

Financial Comments (DG 04/09/2019)

37. The current NCC Public Health investment is £8,570,135 per year, funded from the Public Health Grant. If there are increases or reductions to future grants, the affordability of the contract will be re-assessed in light of this.

Background Papers and Published Documents

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

- New Psychoactive Substances (NPS) paper - April 2019 – Adult Social Care and Public Health Committee.
- Substance Misuse Service paper – October 2018 – Adult Social Care and Public Health Committee.
- Commissioning Intentions paper – February 2018 – Adult Social Care and Public Health Committee.

Electoral Division(s) and Member(s) Affected

- All.