TRAFFORD COUNCIL

| Report to: | Health Scrutiny Committee |
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| Date: | February 2015 |
| Report of: | Executive Member for Community Health and Wellbeing |

Report Title

Commissioned Alcohol Services and Current Performance Update

Summary

Introduction

The following report is an update to the previous report provided to Committee in September 2014. The report will update the Committee on performance over the six months including updates to the delivery of current commissioned Alcohol services is operating to meet the needs of Trafford residents. The update will seek to provide assurances that services are reflecting the needs of Trafford residents.

Trafford continues to be the only GM area to be better than the England average for Alcohol Treatment Prevalence. However, data for Trafford shows that individuals with alcohol problems experience a higher incidence of ancillary physical and psychological health issues when compared with other GM areas. Trafford still has a cohort of older clients with entrenched issues. This can result in the need for expensive inpatient treatment and therefore requires to be carefully managed.

The Quarterly Strategic Alcohol Steering Group oversees multi-agency activity to deliver Trafford's Alcohol Action Plan. A significant amount of activity has been initiated utilising this plan with successful outcomes, the plan currently contains 22 actions to address issues under the headings of Young People, Health and Wellbeing and Crime and Disorder. At this time there are no areas for concern, 6 actions show amber where future activity is planned. (Copy Action Plan attached Appendix 1)

Trafford's recent Alcohol Awareness week involved a number of services from within the Council and external providers, for example; Greater Manchester Police, NHS, Greater Manchester Fire and Rescue Service, Youth Services, Safer Communities, Youth Offending Service, Drug and Alcohol providers, DAAT (Drug and Alcohol Action Team) and education. All externally commissioned alcohol services contributed to the provision of activities throughout the week. (A full evaluation can be found at Appendix 2). The recent Dry January initiative has built upon Alcohol Awareness Week, which was supported by a robust Communications Plan to maximise sign up to the initiative.

Recent Changes to Trafford's Alcohol Service Provision

Recent changes have been made to better tailor services toward Trafford's need.

The rationale for this has been –

- To ensure that the best services are provided for the funding available.
- Improve communication between all agencies and the various businesses that provide alcohol services.
- To provide a more easily understood and streamlined pathway for all alcohol services leading to speedy referrals and continuity in effective treatment.
- To enhance services to increase the likelihood of a service user remaining in a recovery programme and working toward abstinence.
- To reduce the amount of alcohol related hospital admissions.

Recent Changes include -

RAID Project

In times of financial austerity, it is recognised that synergies and opportunities for cost savings can accrue via collaborative commissioning. As part of this integrated approach, Trafford has committed some funding as part of the RAID model (Rapid Assessment Interface Discharge).

This funding has led to the employment of 2 x Alcohol Nurses who work from Trafford General and UHSM. In the period from April 14 - Dec 14 the two staff members saw 294 people with alcohol related issues, of these 55 were referred to local alcohol services for bespoke treatment.

It is worth noting that this time period really runs from June as the first two months were taken up with the set-up of the system. Other staff at the two hospitals have picked up confidence in dealing with both mental health and alcohol issues as they work alongside the RAID Nurses.

A report was submitted to SLT on 13th February 2015 for the consideration of future funding for this project. It has been agreed to continue to fund two Alcohol Liaison Nurses for the next financial year.

Community Detoxification

As previously updated the Community Detox Service was remodelled as part of a recent tender exercise.

The service changed on 01/05/14 when GMW NHS took on a new contract with a specific emphasis to enhance the likelihood of sustained abstinence and recovery.

There have been 58 individuals completing detox to date, 57 of which have made the journey across to Phoenix Futures for further support with their recovery. It is expected that the second year of operation will improve on these figures as the service becomes more established and known within the borough.

This has been an increase of 44 (314%) over a similar period, from the previous provider.

Alterations to Service Phoenix Futures – A New Direction

Due to identified under-performance of this service, Phoenix were asked to evaluate how to improve the current offer to clients in order to increase completions and reduce the numbers re-presenting to the service. The document entitled 'A New Direction' made the following changes:

- 1. Clients can now choose between 4 and 12 weeks of structured treatment if 4 weeks is chosen, clients enter a holding phase before being referred across to Recovery Support and are then discharged.
- 2. Clients can be transferred to Community Recovery Service (CRS) if they are still drinking.
- 3. Individuals will be offered the opportunity of engaging in one-to-one meetings with their key worker, without the need to enter groups.
- 4. Those who are already abstinent have the opportunity to engage with Recovery Support immediately and access Mutual Aid (Peer Support) and Education, Training and Employment and check-in appointments.

In this way, the service more clearly wraps around the client, providing support in a number of diverse ways in order to maximise the opportunity for sustained recovery.

A new ILLY database is being developed which will be a marked improvement on the limited JANUS system currently in operation at this service, allowing more data to be captured on individuals.

New Alcohol Pathway

Consultation has taken place in order to design and implement a new improved referral pathway for those adults requiring treatment for alcohol issues. This ensures speedy, appropriate and effective treatment with a continuity of care across agencies and service providers.

New Shared Care Protocols

Trafford Council DAAT has facilitated consultation and agreement between health care professionals and treatment providers to ensure that Shared Care Protocols have been introduced for the provision of medication to address alcohol misuse. This ensures that GP's are fully involved with adequate support provided to Trafford residents.

This again will increase the likelihood of a service user remaining in recovery working toward abstinence.

Young Peoples Alcohol Screening Tool

A new alcohol screening questionnaire has been introduced in Trafford for the use of all services who work with and have interaction with young people. Presentations and brief training has been given to a wide variety of agencies in

order to ensure that the tool is used to professionalise the process of young people's referrals.

The form is now displayed on the Council Website, referrals to the Young Persons Alcohol Service has shown an increase.

Nurture Development / Emerging Horizons

Nurture Development will work with local Trafford communities to deliver ABCD training so they can empower themselves to enact positive change The Council will work with Emerging Horizons and Nurture Development to maximise use of this one-off funding and ensure a legacy which will inspire others to embrace recovery – as part of this work, regular performance updates are provided to NHS-England.

Trafford Service Provision for Alcohol.

The following section will provide an update to the end of Q3 performance.

GMW (Community Detox and Residential Detoxification)

| Target | Actual |
|--|------------------------------------|
| 200 referrals for community detox (For the | 85 in the 7 month operating period |
| year) | |
| 70 successful completions (For the year) | 58 in the 7 month operating period |

There is no data available in relation to the rate of clients' re- entering the system for further treatment within a 6 month period. This is due to a temporary problem with the national DOMES database.

Phoenix Futures Single Point of Contact (SPOC). ARNS (Alcohol Recovery Navigation Service)

This is the major provider of all Alcohol Services across Trafford.

| Target | Actual |
|-------------------------------------|-------------------|
| Referred to service and engage with | 383 Green to date |
| Recovery plan 378 | |

Young Peoples Service. (Delivered by Phoenix Futures)

This service caters for people up to the age of 25 years.

Performance April- December 2014

| Target | Actual |
|------------------------------------|----------------------------|
| Conduct prevention sessions 30 per | 67 to Q3 exceeding target |
| annum | |
| Referrals received 255 | 196 to Q3 exceeding target |
| Successful discharges 95 | 58 to Q3 |
| Chlamydia Screening 35% | 37% to Q3 exceeding target |

Local Commissioned Service for Interventions taken by GPs

There is a budget of £40,000 to enable Trafford GPs to conduct what is known as brief or extended interventions for their patients. This process starts with a screening conversation about alcohol consumption. The actual spend at this time is £14,185, a budget saving can therefore be made in this area next year.

Use of Inpatient Detox

| | No. of Bed Nights |
|----------------|-------------------------|
| Placement | Used |
| Chapman Barker | |
| Unit | 77 |
| | |
| Smithfield | 228 |
| | 7 x Clients (all for 12 |
| Residential | week stay) |
| | |
| | 647 |

Overall Position / Summary

At the end of Q3 overall performance is positive as less funding has been spent to meet our obligations in relation to alcohol related harm and abuse.

There has been an increase in performance in the following area -

- Community Detoxification.
- The number of successful completions, with clients remaining in service.
- An increase in numbers of those engaging in Community Recovery.

Community based assets and peer led recovery groups are identified as being an increasingly important area to assist individuals achieve long term recovery and abstinence. Strengthening this area will help improve the long term health of individuals and assist to reduce the burden and cost of those who re attend services.

With this in mind the Council intend to conduct a mapping service of existing community resources, looking also to strengthen and support groups that exist and ascertain what other opportunities are available.

Recommendation(s)

The Health Scrutiny Committee note the information included within the report.

Contact person for access to background papers and further information:

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