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| <b>Subject:</b>          | <b>Substance Misuse Inpatient Detoxification Beds</b> |   |                     |
| <b>Date of Meeting:</b>  | <b>23<sup>rd</sup> March 2016</b>                     |   |                     |
| <b>Report of:</b>        | <b>Director of Public Health</b>                      |   |                     |
| <b>Contact Officer:</b>  | <b>Kathy Caley, Lead</b>                              |   |                     |
|                          | <b>Name:</b>  | <b>Commissioner for</b>                 | <b>Tel: 29-6557</b> |
|                          |   | <b>Substance Misuse</b>                 |                     |
|                          | <b>Email:</b>   | <b>Kathy.caley@brighton-hove.gov.uk</b> |                     |
| <b>Ward(s) affected:</b> | <b>All</b>  |   |                     |

**FOR GENERAL RELEASE****1. PURPOSE OF REPORT AND POLICY CONTEXT**

- 1.1 In December 2015 SPFT gave notification that they would be terminating the substance misuse inpatient detoxification service from 31<sup>st</sup> March 2016. This report sets out the actions taken to ensure the ongoing provision of the service for Brighton and Hove residents.

**2. RECOMMENDATIONS:**

- 2.1 That the Committee notes the information regarding the provision of Substance Misuse Inpatient Detoxification Beds as set out in the report.
- 2.2 That the Committee notes the reasons for urgent action to re-provide Substance Misuse Inpatient Detoxification Beds as set out at paragraph 3.4 of the report.

**3. CONTEXT/ BACKGROUND INFORMATION**

- 3.1 Adult community based substance misuse (drug and alcohol) services are provided by Pavilions, a partnership of organisations led by Cranstoun, which began providing services locally on the 1<sup>st</sup> April 2015. A range of treatment interventions are offered to support services users to work towards recovery in a community setting. Each person entering treatment services is allocated a 'care co-ordinator' to work specifically with them around their needs.
- 3.2 Sussex Partnership Foundation Trust (SPFT) currently provides inpatient detoxification services to individuals in Brighton and Hove who require this service. SPFT provide this service from Promenade Ward, which is part of Mill View Hospital in Hove. Contractual responsibility for this service sits with the Clinical Commissioning Group (CCG), and is part of the wider mental health block contract that the CCG has with SPFT.
- 3.3 The majority of service users who need to detoxify from a substance will do so in a community setting. In 2014/15 a total 2,391 individuals accessed substance

misuse treatment services<sup>1</sup>. Of these individuals, 145, or 6% of all people accessing treatment services were admitted to inpatient detoxification services at some point<sup>2</sup>. N.B. an individual may access services on more than one occasion.

- 3.4 In December 2015 SPFT provided formal notification that they would be terminating the contract for the provision of substance misuse inpatient detoxification beds from the 31<sup>st</sup> March 2016. Therefore it has been necessary to secure alternative provision from the 1<sup>st</sup> April 2016 onwards. The official notice period given by SPFT was three months, which is a relatively limited timeframe given the steps required to secure alternative provision. BHCC have therefore opted to work with Cranstoun, the lead provider in the Pavilions Community Substance Misuse Services partnership, and use a detoxification unit they have elsewhere. From the 1<sup>st</sup> April 2016, any Brighton and Hove resident with a clinical indication for an inpatient detoxification will be referred to 'City Roads' residential detoxification service based in Islington, north London. City Roads is a 21 bed unit that is staffed 24/7 by a clinical and social care team. Cranstoun have been providing this service from the City Roads location for a significant period of time, and current patients come from many areas of the country. Recently successful completion rates for patients attending City Roads has increased to 74%. A local key performance indicator will be included in the service specification to ensure this continues.
- 3.5 Service users from Brighton and Hove will now have to travel outside of the city to access inpatient detoxification services. However, this is generally in keeping with what happens in other areas of the country, as local availability of this type of service is limited. The average length of stay will be ten days. Contact with the outside world is usually restricted when a person is undergoing detoxification, and therefore being situated in an area that is not their home city may make detoxification more successful. After detoxification a service user will return to Brighton and Hove, and be supported to continue their recovery by linking to the existing local recovery community.

#### **4. ANALYSIS & CONSIDERATION OF ANY ALTERNATIVE OPTIONS**

- 4.1 For a small minority of service users, inpatient detoxification plays a vital part in their recovery from substance addiction. Inpatient detoxification is a fundamental element of the substance misuse care pathway, and it has been essential to ensure that services continue to be available for this very complex and vulnerable client group. The decision to use City Roads in Islington was based on the short time frame available to set up an alternative solution, and the fact that there is extremely limited, value for money, alternative provision in Brighton and Hove, and the surrounding area.
- 4.2 East Sussex County Council (ESCC) currently commission SPFT to provide inpatient detoxification services, and so are also seeking to put alternative provision in place from April 2016. East Sussex commissioners are taking a similar approach to BHCC and working with their existing community services provider to secure inpatient detoxification services outside of their geographical area.

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<sup>1</sup> Public Health England Diagnostic Outcomes Monitoring Executive Summary (DOMES) Q4 2014/15

<sup>2</sup> Data taken from the Commissioning Support Unit commissioned by Brighton and Hove CCG, which is taken from the Secondary User Service (SuS) data system, and from the Nebula Data System.

- 4.3 Historically West Sussex County Council have spot purchased inpatient detoxification services from a number of providers. Their existing contractual arrangements expire in May 2016, and given the more lengthy timeframe, West Sussex are undertaking a procurement process for a new Framework Agreement for inpatient detoxification services.
- 4.4 One alternative to the Brighton and Hove approach would have been to undertake a procurement exercise with a view to developing a similar framework agreement. The limited timeframe between formal notification and service termination made this very challenging. In addition, given the limited NHS/Voluntary sector provision of inpatient detoxification services BHCC would have been required to use providers in areas such as Bognor, Portsmouth and Southampton. Any of these providers would also involve travelling outside of the Brighton and Hove local area. There is added value in one provider being responsible for both the community and the inpatient pathway, and Cranstoun will now oversee both elements of delivery. It is expected that this will have a positive impact on the outcomes for the service user.
- 4.5 Re-establishing a local, Brighton and Hove based, detoxification unit would be extremely costly and potentially unviable given the current financial climate. It would mean undertaking a procurement exercise with a view to leasing or purchasing a building, in partnership with a provider, to set the service up entirely.
- 4.6 As with any service change, an Equalities Impact Assessment has been undertaken to ensure that the impact of the changes are considered. BHCC are working with service users and partners, including SPFT, to ensure that the new inpatient detoxification model adequately considers the needs of those using the services. BHCC will set up a transition plan with current and new providers to make sure that the handover is comprehensive, and that services are clinically appropriate.
- 4.7 This option is seen as a short to medium term option. It will be reviewed and evaluated, and if it is not considered to be the best way to provide this service, alternative options will be considered.

## **5. COMMUNITY ENGAGEMENT & CONSULTATION**

- 5.1 There has been extensive consultation with service users, partners and other providers regarding the development of the City Roads service. In early February 2016 a consultation event was facilitated by Cascade Creative Recovery, a peer-led organisation. It was attended by individuals with lived experience of addiction, and past service users of the SPFT service. It was also attended by a number of provider organisations with a vested interest in substance misuse service provision. The outcome was the development of a list of key points to be considered as the patient pathway was developed.
- 5.2 Following on from this, a pathway development meeting was held in mid-February. Managers from City Roads attended this meeting, as did individuals from the initial consultation session. Case studies were used to highlight how the complex needs of Brighton and Hove residents requiring the inpatient

detoxification service would be met. Of particular focus were the transportation needs of service users between Brighton and Hove and Islington. A number of options are being drawn up to support patients in travelling, and these will be tailored based on individual need.

## **6. CONCLUSION**

- 6.1 Inpatient detoxification from substances is a vital part of the substance misuse treatment pathway. Taking the approach outlined above will ensure that this essential part of the pathway can continue. Delivery of the service will be monitored in the short to medium term, to allow evaluation of the outcomes. Should this approach not meet expectation a review can be undertaken and alternative solutions considered.

## **7. FINANCIAL & OTHER IMPLICATIONS:**

### Financial Implications:

- 7.1 From April 2016 the budget allocated to substance misuse detoxification from the ring-fenced Public Health grant will be approximately £0.250m, which equates to a funding reduction of approximately 40% from 2015/16.

*Finance Officer Consulted: Mike Bentley*

*Date: 21/01/16*

### Legal Implications:

- 7.2 There are no legal implications arising from this report which is for noting.

*Lawyer Consulted: Elizabeth Culbert*

*Date: 080316*

### Equalities Implications:

- 7.3 Equalities, and the reduction of health inequalities, are considered in the service specification development of any Public Health service. Services will be developed to ensure that all individuals have equal access. SPFT have confirmed that there are no TUPE considerations.

### Sustainability Implications:

- 7.4 The approach outlined above ensures that substance misuse inpatient detoxification services can continue to be provided.

### Any Other Significant Implications:

- 7.5 None

## **SUPPORTING DOCUMENTATION**

**Appendices:**

1. Health and Wellbeing Board (15<sup>th</sup> March 2016) paper on Substance Misuse Inpatient Detoxification
2. Appendix to Health and Wellbeing Board (15<sup>th</sup> March 2016) paper on Substance Misuse Inpatient Detoxification

