Health and Well-Being Scrutiny Report

Substance Misuse Public Consultation

Decision to be taken by: for information

Lead Director: Tracie Rees



Useful information

■ Ward(s) affected: All

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1. Summary

- 1.1 Substance misuse services have been identified as part of the Councils Spending Review Programme for 2016/17, and the city council is exploring whether £1million could be saved from the overall pooled substance misuse budget of £8.3 million.
- 1.2 In order to achieve a new service model within the reduced financial envelope a consultation exercise has been designed to gain the views of key stakeholders over the future design of services, the consultation went live November 4th for an initial 8 week period.
- 1.3 This paper provides the background information to the consultation, and outlines the consultation approach for the benefit of the Health and Well-Being Scrutiny commission.

2. Recommendations

2.1 Health and Well Being Scrutiny are asked to note the approach.

3. Supporting information

Background

- 3.1 Leicester City Council currently contracts a range of specialist substance misuse services across 4 different contracts which comprise 2 community based services for adults including a Wet Centre and services within H.M.P. Leicester; a specialist service for young people; and a housing-related support service combining supported accomodation and floating support which is currently being tendered and will replace current provision at Midland Heart Hostel. The adult criminal justice substance misuse service is contracted across Leicester, Leicestershire and Rutland, and jointly commissioned with partners in Leicestershire and Rutland Councils, the Office of the police and crime commissioner (OPCC), and NHS England.
- 3.2The funding that supports the commissioning of the treatment system for substance misuse is made up of a pooled budget arrangement with partners as detailed in Table 1.

Table 1: Pooled Budget

Income 14/15	Net Budget £'000
Leicester City Public Health Grant	6,283,575
Leicestershire County Public Health Grant (sub-regional Services)	887,687
Rutland Public Health Grant (sub-regional Services)	45,836
Police and Crime Commissioner Leicester, Leicestershire & Rutland (subregional Services)	509.174
NHS England (HMP Leicester Services)	616,723
Total	8,342,995

- 3.3 In addition to contracted services, the funding also pays for LCC staff, which commission and monitor the contracts.
- 3.4 In Leicester contracts for adult and young person's community services are set to end in June 2016 with options for 1 or 2 year extensions. This coincides with the end of contracts in Leicestershire and Rutland, and healthcare in HMP Leicester. In order for new services to be in place by 01st July, a new model will need to be agreed and procurement commence by the summer of 2015. The planning phase for new contracts provides the opportunity to consider how future services could be configured and potential savings could be made. With the contracts of partners ending at the same point, there is opportunity to consider future joint arrangements that could yield economies of scale to support the financial position.
- 3.5 Public consultation provides an opportunity to seek the views of users, carers, potential providers and other interested residents on a future reconfiguration of service to develop the model, and build the evidence base for the preferred option.
- 3.7 The consultation approach is planned to take place on a two-stage basis: firstly an 8 week programme over November to December to seek the views on the overall organisation of services-specifically a LLR configuration and/or involving HMP Leicester; and to obtain feedback on particular areas of need. This will be followed by a shorter 4 week consultation over May/June which will ask more detailed questions about the design of services in the light of the outcome of the first stage.
- 3.8 The consultation approach document is attached at appendix 1.

4. The Consultation Approach

- 4.1 The consultation approach has been planned to take place on a two-stage basis: firstly an 8 week programme over November to December which will seek the views on the overall organisation of services-specifically a LLR configuration and/or involving HMP Leicester; and areas of need. This will then be followed by a shorter 4 week consultation over May/June which will ask more detailed questions about the design of services in the light of the outcome of the first phase; this will be presented for sign off following phase 1.
- 4.2 There are 2 key questions regarding the future configuration of services for phase 1:
 - Do you think that all specialist substance misuse services should be organised as one service across Leicester, Leicestershire and Rutland?

- Do you think Specialist substance misuse services in H.M.P. Leicester should be provided as part of all other specialist substance misuse services in the local community?
- 4.3 A further 3 areas considering how services should be designed to meet need cover, the needs of young adults; new and emerging drugs; meeting the needs of Leicester's diverse population.
- 4.4 Consultation will be carried out through the use of an online questionnaire; service user and provider focus groups.
- 4.5 The 2 stage approach provides an opportunity for public consideration, in particular by those directly affected such as users, carers and providers of the advantages of a joint approach. Should the results of the consultation demonstrate support for a joint approach with partners, this will be used in further discussions with the County Councils and NHS England over commissioning on a collaborative basis, as the decision regarding this approach requires sign off by all the partners. A two stage process allows time for further public discussion around the exact model required for the City.

6. Details of Scrutiny

The Health and well-being scrutiny commission has asked for information regarding this consultation, and this paper is to be presented at its meeting of 16th December 2014.

14. Financial, legal and other implications

14.1 Financial implications

14.2 Legal implications

14.3 Climate Change and Carbon Reduction implications

No implications

14.4 Equality Impact Assessment

A full equality impact assessment will be completed during the consultation stage of the proposed recommendations. Work to date has considered the current profile of users in

treatment and the likely impact of any service cuts on these groups. The majority of users in treatment are white British male (75%), with women and BME groups being under-represented, this may be due to prevalence or access, and this is not currently known. Any reduction that impacts on service directly may negatively impact on white British males, or attempts to engage with BME groups and women.

14.5 Other Implications (You will need to have considered other implications in preparing this report. Please indicate which ones apply?)

N/A

- 15. Background information and other papers: none
- 16. Summary of appendices:

Appendix 1: Consultation approach

17. Is this a private report (If so, please indicated the reasons and state why it is not in the public interest to be dealt with publicly)?

No

18. Is this a "key decision"?

No

19. If a key decision please explain reason

This is a key decision by way of

- 1) Significant Impact on communities of all wards particularly disadvantaged areas
- 2) Total Budget is 8.3 mill significant savings of 1 mill are being requested
- 3) There is a significant social risk to the City

Appendix 1 Substance Misuse Consultation Approach

Overview

Purpose

(Briefly outline the council's objectives and the options/ proposals being consulted upon)

Background

The city council is undertaking a spending review in response to reductions on our budget and is exploring whether £1m could be saved from the overall substance misuse budget of £8.3m.In the context of the spending review for substance misuse and possible changes in commissioning intentions from partners it has been proposed to consult over the configuration of substance misuse services from 2016/17 onwards.

The planned consultation will be in two stages: a first stage of eight weeks and second stage of four weeks.

The intention for this consultation in the first stage is:

- To obtain feedback on the configuration of services
- To obtain feedback on particular areas of need

The intention for the second stage of the consultation is:

 To obtain more detailed feedback on the proposed new model in the light of the outcome of the first stage of feedback and ongoing analysis of substance misuse need in the city. The consultation approach will need to be subject to separate discussion and agreement.

Areas for consultation

Future configuration of services

Having one service in Leicester

There are currently four different services in the city. The advantage of having one service would be more effective information sharing, and the savings that could be made from having one contract and one organizational structure. However, there would still be a need to provide a designated service for young people as part of the whole service.

Leicester Leicestershire and Rutland organized service

The impact of possible £1m savings is likely to be lessened if the contract for the full range of specialist substance misuse work extends over a wider range of services as economies of scale could be achieved through one contractor (and any partner agencies) working across a number of different areas but requiring a single performance and management structure.

There may also be advantages for one service working with agencies that work across LLR boundaries such as the Police and UHL Hospital Trust.

Specialist substance misuse services in HMP Leicester.

By keeping specialist substance misuse services in HMP Leicester as part of the overall substance misuse service it will be easier to ensure there is continuity of care when individuals go in and out of the prison as the same organization will be responsible for providing it.

Meeting Need

Having a designated young adults service as part of any service

At 18, young people are eligible for the adult service yet we are aware that many young people are still developing physically and emotionally in their early 20s. This is also an age where alcohol and drug use is relatively high. However most users of the adult services are 30+ and therefore there are advantages to tailoring a specific service for the needs of young adults.

New and emerging drugs

The last 3-4 years has seen a growth in the existence and availability of new drugs (sometimes called 'legal highs' or 'novel psychoactive substances'). These present particular challenges to services as the content and effects of the drug are not always known, and new substances are coming onto the market at a fast rate.

Meeting the needs of Leicester's diverse population

Leicester has a diverse population and we are keen to seek views on how services can best engage with and encourage access from the range of communities in Leicester.

Target audiences

(Please state clearly who is and isn't being engaged, highlighting any important sub-groups of interest)

The target audience for the consultation include:

- Service users potentially affected by change
- Providers currently delivering substance misuse services
- Family members affected by someone's substance misuse
- Stakeholder groups, including, public health, health services, prison service, social care services, children's services, Police.
- Members of the public will also be able to have their say on the proposals through the city council's website.

The different ways to participate

(Please state what ways are available for people to take part. You should also highlight any measures that you are taking to reach out and/or improve accessibility)

For service users/family and carers

- The online survey will be promoted through flyers in services in order to encourage take up
- Paper copies of the survey will be made available so they can be distributed to users via services
- Focus group sessions will be carried out with the user groups within services this will include users within HMP Leicester and the Carers group DAFFs.

For Providers

- Focus groups will be offered for each distinct service, including Leicester Recovery
 Partnership open access service, LRP neighbourhood teams, Criminal Justice drug and
 alcohol team community and prison, Heathfield house hostel, Cornerstone young
 Person's service.
- Additional stakeholder groups will be held for those working in areas such as housing/homelessness, public health, social care and health and children's services.
- In addition we will ask VAL to circulate information to other VCS providers not currently involved or delivering these services – in order to get a wider perspective on impact.

For other interested stakeholders

The Public

Citizen's Space will provide the portal for the public to get information about the consultation and provide their views.

We will attend a small sample of community meetings over November-December – in wards where there is a high(Abbey), medium(Charnwood) and low(Belgrave/Latimer) take up of services (based on population estimates) and relatively high levels of derivation. This will be in order to promte the consultation.

Flyers and posters will be distributed to all community centres in Leicester.

Summary of proposed service improvements and changes

Substance misuse services are a key vehicle for reducing drug and alcohol-related harm by supporting individuals through successful treatment to abstinence or controlled use and reducing the spread of blood borne viruses such as Hep C and HIV through harm reduction measure

The last four years have seen much organisational change in local substance misuse services, including repeated system-wide retendering programmes over 2010-11 and 2012-13. By reorganising services on an LLR basis and through keeping HMP Leicester as part of these services we are minimising the impact of £1m savings and supporting the development of one service. This in itself will bring benefits through continuity of care, a wider canvas of support for recovery and improved joint working across the sub-region with LLR services such as hospitals and the Police.

Supporting information

(Briefly outline the supporting information to be provided. Indicate any relevant recent engagement or informal dialogue with target audiences)

There has been no formal engagement with stakeholders to date on this matter although there has been discussion with providers over the ongoing re-fresh of the needs analysis and the setting up of stakeholder groups.

We are aware through recent informal contact with providers of concerns relating to possible funding reductions and further change across services.

Supporting information will include:

- A briefing with background information
- A frequently asked questions document
- Webpage members of the public will be able to have their say on the proposals

Questions/topics

(Briefly outline the questions to be discussed as part of the consultation – or append the proposed questionnaire)

Please see questionnaire attached

Channels

(Please state the channels of communication that you will be using to engage with target audiences, e.g. online, postal, face-to-face. You should also highlight any third parties that you are proposing to involve to support outreach)

Target audiences will include:

(a) Users/carers

Focus groups, distribution of paper surveys; promotion of online survey.

(b) Substance misuse service providers

Focus group, distribution of paper surveys; promotion of online survey.

(c) Other stakeholders

Focus group, distribution of paper surveys; promotion of online survey.

Documentation

(Please state the documents that you are planning to make available as part of your exercise, e.g. booklet of supporting information, questionnaire, analytical or technical reports. You should also indicate whether you need someone to design this documentation and whether printed copies will be required)

- Background briefing-online and printed
- Questionnaire-online and printed
- Frequently asked questions document online and printed.

Events

(Please indicate whether you anticipate a need for any online or face-to-face events to brief stakeholders or the public or to support discussion of the issues under consideration)

- Service users/carer focus groups
- Provider focus groups
- Other stakeholder focus groups

Analysis

(Please give an indication of the detail of analysis required and whether there are any important sub-groups of interest)

We will look at feedback by gender, ethnicity and disability as well as neighbourhood.

Reporting

(Please give an indication of when, and how, target audiences are likely to be in receipt of feedback)

A response will be prepared for lead members and then a plan devised for the second stage of consultation which will look at the detail of the preferred local model. This will need to be done in time to carry out consultation in early may in time for tendering to start in July/August 2015.