



Northumberland

County Council

Health and Wellbeing Overview and Scrutiny Committee

5TH APRIL 2022

Addictions Services: Impact and considerations of the Independent Review of Drugs by Professor Dame Carol Black and the new UK Drug Strategy.

Report of (Officer Name): Liz Morgan, Interim Executive Director of Public Health and Community Services.

Cabinet Member: Cllr Wendy Pattison. Portfolio holder Adults' Wellbeing.

Purpose of report

To advise scrutiny members of the recommendations made by Professor Dame Carol Black's Review of Drugs; the new funding package made available to support the delivery of the 2021 England Drugs Strategy; and the associated requirements and conditions placed upon Northumberland County Council (NCC) and its partners.

Recommendations

It is recommended that the Health and Wellbeing Overview and Scrutiny Committee:

- Considers the contents of this report, the key issues and implications.
- Note the additional funding for drug/alcohol treatment and recovery.
- Comment on the proposals for Northumberland services.

Link to Corporate Plan

This report is relevant to the commitment within the NCC Corporate Plan 2018 – 2021 to improve health and wellbeing while addressing drug and alcohol misuse; and the priority to ensure our most vulnerable residents get the support and care they need.

Key issues

The Council (via the public health ring fenced grant) has consistently maintained its investment in drug and alcohol treatment and as a result has an effective system with a skilled workforce that creates positive outcomes for some of our most vulnerable and marginalised residents. Our adult treatment service - The Northumberland Recovery Partnership (NRP) - has shown resilience and innovation in its response to the pandemic,

ensuring patient safety and staff wellbeing. However, there are ongoing challenges, some of which have been exacerbated by the pandemic:

- Nationally, drug related deaths have been increasing for the past decade and the North East has the highest rate of deaths in England¹. Though Northumberland has amongst the lowest levels of deaths in the North East, rates are still above the national average. Many deaths are a result of long-term substance abuse, a highly chaotic lifestyle, and often untreated mental health conditions. People with these issues can be difficult to engage in treatment and alternative options and ways of working are needed.
- During the pandemic, NRP has reduced the number of people discharged from treatment as a means of maintaining the safety of some of its most vulnerable patients. The decision makes sound clinical sense, and will have undoubtedly saved lives, but it has increased the number of people the service works with, and the caseloads of staff.
- People who drink alcohol problematically have increased their use during the pandemic. Research has shown this has been particularly acute in areas of high deprivation across the north of England². Though at this stage it is impossible to determine the full extent of the harms created, NRP is experiencing a steady upturn in referrals and there is increasing unmet need within the community. If referrals continue to increase, the service will need to adapt its model accordingly, potentially bringing in additional specialist alcohol staff.
- Nationally there is a staff shortage within the substance misuse sector and services are struggling to recruit and maintain a skilled and experienced workforce. Despite increased investment from NCC throughout 2021/22, NRP have been unable to recruit to several key posts and this has resulted in some areas of delivery being under resourced. Without intervention, the situation is unlikely to change, and we will need to support the service in developing an employment offer that is attractive to potential staff and bring the required quality into the County.
- Access to support services was often reduced during the pandemic, with some services being forced to close and others restricting their delivery. Addiction rarely exists in isolation and without the opportunity to address wider health needs, have somewhere safe to live and access to education and employment, the benefits of treatment can be difficult to maintain.

The publication of the Review of Drugs³ and the new Drug Strategy⁴ presents a turning point in the Government approach to addressing the harms of substance misuse. Local Authorities will receive additional funding to deliver their treatment systems, but alongside that, increased scrutiny and accountability will be implemented to ensure that the requirements of the Drug Strategy can be successfully delivered at a local level. Local

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<https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/bulletins/deathsrelatedtodrugpoisoninginenglandandwales/2020#possible-explanations-for-the-increase-in-drug-related-deaths>

2 [The COVID-19 alcohol paradox: British household purchases during 2020 compared with 2015-2019 \(plos.org\)](https://doi.org/10.1371/journal.pone.0238888)

3 [Independent review of drugs by Professor Dame Carol Black - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/news/independent-review-of-drugs-by-professor-dame-carol-black)

4 <https://www.gov.uk/government/publications/from-harm-to-hope-a-10-year-drugs-plan-to-cut-crime-and-save-lives>

Authorities must be prepared to work within the conditions of the funding award, putting the required structure in place to ensure local priorities are met, as well as national ones, and contribute to the overall successful delivery of the Drug Strategy in the initial three-year period to ensure there is a sound case for further funding and support. In summary, the key issues for NCC, presented by the Drug Strategy are:

- Appropriate local public health commissioning and financial resource to manage the new funding package.
- Expectation that existing investment from the public health grant is maintained.
- Develop new and innovative areas of service delivery, while also addressing the challenges faced by the service as outlined above.
- The increased burden of adhering to, and reporting against, a new national outcome framework and increased scrutiny from Government of our system delivery.
- Minimise any risk presented by NRP being in its final contracted year of delivery.
- Responsibility for the local delivery of the Drug Strategy to sit within a strategic partnership (existing or newly created) which has the appropriate seniority and partner agency representation.

Background

Northumberland drug and alcohol treatment service.

NRP is delivered by a partnership between Cumbria, Northumbria, Tyne and Wear NHS Foundation Trust (CNTW) and the voluntary sector services Turning Point and Changing Lives. The service provides treatment for drug and alcohol dependency across Northumberland. Treatment includes psychosocial therapies, substitute prescribing, harm reduction interventions (such as needle exchange and supervised consumption of methadone) and recovery support. The service is commissioned by the council's Public Health team and will enter its final year of contract in 2022/23. The forthcoming Provider Selection Regime, which will come into force as part of the Health and Care Bill (scheduled for August 2022), will create the option of continuing with the current service providers without having to pursue a full re-tendering process.

Three of the Public Health metrics within NCC's performance framework relate to NRP activity – successful completion of treatment and non-return within 6 months for opiate, non opiate and alcohol users (metrics are grouped by substance). In general, NRP has demonstrated good performance against these indicators though the pandemic has reduced the number leaving treatment and increased demand, both of which have impacted negatively on these outcomes. NRP has introduced a range of interventions to protect its most vulnerable clients during the pandemic and to continue to provide a service.

Along with NRP, our young people's service, Sorted, works with children and young people under 18 years of age to reduce the harms of substance use and improve health and wellbeing. We also commission the carers service, Escape, to deliver support to those who have a caring role for people using drugs and alcohol problematically. Additional work to prevent the harms of substance use, takes place with a range of partners including

Northumberland Clinical Commissioning Group, the North East and Cumbria Integrated Care System and local NHS primary and secondary care services.

The Review of Drugs and new Drug Strategy.

In 2019 Professor Dame Carol Black was appointed by the Government to lead an independent review of drugs. The review examined the links between addiction and crime, and the role of treatment and recovery in tackling addiction and reducing harms. The report, published in two parts in Feb 2020 and July 2021, found that drug use is intrinsically linked to violent crime, poverty and deprivation; drug related deaths are at an all-time high; and that disinvestment in the treatment system had resulted in higher unmet need and the workforce had reduced in number and quality. In all, the report made 32 recommendations, including the need for enhanced and protected funding by Government; improved treatment and recovery services; more emphasis on access to employment and housing; and greater Local Authority accountability.

The Government's response to the review, published in July 2021, supported the findings, and committed to publishing a long-term drug strategy by the end of the year, which would focus on reducing demand, supporting treatment, and targeting crime. There had already been a commitment made by Government in early 2021 to provide additional funding of £80m to Local Authorities in 2021/22 to invest in treatment and recovery services. Additional funding was also promised as part of the new Drug Strategy for 2022/23 and beyond.

As part of the initial £80m (termed the 'Universal Grant') available, NCC was awarded £350k to enhance local treatment delivery – especially activity that reduced drug related deaths and increased access and outcomes for criminal justice clients; and an additional £60k for in-patient detoxification (IPD). The £350k treatment fund has created an additional six new staff posts; an enhanced health and wellbeing prison release pathway; a wider physical healthcare offer from our harm reduction service, increased naloxone provision and a programme of staff training and development opportunities. The IPD fund has enabled NCC to develop a consortia partnership with North Tyneside and Newcastle Councils, pool resources and create an in-patient service, in partnership with CNTW. The service was one of the first in the country, using the new funding, to become operational.

The new Drug Strategy was published in Dec 2021, and with it, a commitment to provide an additional £533m over the next three years to deliver the recommendations of the Dame Carol Black Review and enhance local treatment and recovery services. The Office for Health Improvement and Disparities (OHID) has been tasked with coordinating the funding roll out and creating a monitoring framework for Local Authorities and their services to deliver against. Northumberland's provisional three year figures for enhanced funding are set out below:

Northumberland allocation for drug treatment, recovery and inpatient detoxification 22/23 to 24/25.

	2022/23	2023/24	2024/25
Treatment and Recovery	£470,000	£700,000	£1,150,000

Inpatient Detoxification	£62,040	£62,040	£62,040
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Implications

Policy	Drug and alcohol treatment services are delivered within Northumberland in accordance with the conditions of the Public Health Grant.
Finance and value for money	<p>Drug and alcohol treatment is evidenced as being cost effective. It is estimated that the combined benefits of drug and alcohol treatment are £2.4bn every year, resulting in savings in areas such as crime, quality-adjusted life years (QALYs) improvements and health and social care.</p> <p>For every £1 invested in treatment services there is an estimated return on investment of £4, which increases to £21 over 10 years.</p> <p>NCC will receive additional funding over the next three years to invest in our drug and alcohol treatment and recovery system (see above for actual figures).</p>
Legal	None
Procurement	The existing contract for our treatment service expires March 2023. A re-commissioning exercise will be delivered during 2022/23. The opportunities created by DHSC's Provider Selection Regime (expected August 2022) will be considered as part of this exercise.
Human Resources	None
Property	None
Equalities (Impact Assessment attached) Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>	Not undertaken for this report
Risk Assessment	N/A
Crime Disorder &	Drug and alcohol treatment is evidenced as reducing offending. The Ministry of Justice state that offending reduces by up to 59% when a person accesses treatment.

	Within Northumberland a quarter of all referrals to treatment come via the criminal justice system, and over a third of service users have a criminal conviction.
Customer Consideration	The treatment service conducts a quarterly patient feedback survey. Results are shared at contract meetings with Public Health and show a high level of satisfaction with the service. A Health Needs Assessment was undertaken in 2020 and surveyed opinions from current and former service users. Again, a high level of satisfaction was demonstrated.
Carbon reduction	N/A
Health and Wellbeing	The delivery of an effective drug and alcohol treatment system supports the Joint Health and Wellbeing Strategy 2018 – 2028 by reducing the number of alcohol related hospital admissions, improving mental wellbeing and improving outcomes for those living in our most disadvantaged communities.
Wards	All.

Background papers:

Independent review of drugs by Professor Dame Carol Black. Part 1 & 2.

<https://www.gov.uk/government/collections/independent-review-of-drugs-by-professor-dame-carol-black>

UK Drug Strategy – ‘From harm to hope: A 10-year drugs plan to cut crime and save lives’.

<https://www.gov.uk/government/publications/from-harm-to-hope-a-10-year-drugs-plan-to-cut-crime-and-save-lives>

Report sign off.

Authors must ensure that officers and members have agreed the content of the report:

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