

**Executive**

**18 March 2019**

Report of the Health, Housing and Adult and Social Care Policy and Scrutiny Committee

## **Substance Misuse Scrutiny Review Final Report – Cover report**

### **Introduction**

1. This cover report presents the final report (Appendix 1) from the Substance Misuse Scrutiny Review and asks the Executive to consider the recommendations arising from the review.
2. In considering the recommendations the Executive are asked to take into account the response of the Director of Public Health set out at paragraph 7 and additional financial and equalities implications at paragraphs 9 and 10.

### **Recommendation**

3. Having considered the final report at Appendix 1 the Executive is asked to consider the recommendations set it out in paragraph 6 below.

Reason: To conclude the Scrutiny Review in line with CYC Scrutiny procedures and protocols.

### **Background**

4. In April 2018 the Health, Housing and Adult and Social Care Policy and Scrutiny Committee received a topic review request from Cllr Pavlovic to look at the potential impact and outcomes of the Substance Misuse (Drug and Alcohol) contract under a reduced budget and to consider the implications on service delivery.
5. In June 2018, after considering a scoping report presented by officers, the Committee agreed this was a topic worthy of review and that a Task Group consisting of Cllr Pavlovic, Cllr Cuthbertson and Cllr Richardson be appointed to carry out this work on the Committee's behalf. In October 2018 the Committee agreed the following revised remit for the review:

## **Remit**

### **Aim**

To identify the potential impact of planned budget reductions in alcohol services on current service users, future users and the public.

### **Objectives:**

- i. To investigate the impact of the proposed changes to alcohol service provision.
- ii. To investigate the current use of the public health grant to support the required functions around alcohol services.
- iii. Investigate and analyse the whole system of treatment for alcohol service users beyond the contracted specialist service.

## **Consultation**

6. Over a series of meetings the Task Group consulted with the University of York, Vale of York Clinical Commissioning Group (CCG), GPs, York Teaching Hospital NHS Foundation Trust, the police, probation services, a City of York Council (CYC) Public Health Practitioner, a CYC Finance Officer and Changing Lives. The information the Task Group gathered resulted in the review recommendations below.

## **Review Recommendations**

7. The final report arising from their review was presented to the full Health, Housing and Adult and Social Care Policy and Scrutiny Committee in early February and the Committee agreed to endorse the Task Group's recommendations as listed below:
  - i. The financial cut to the substance misuse budget should be re-assessed with immediate effect, with the intention of returning funding to substance misuse provision, and that this include a review of the current budget for 2018-19, highlighting any changes for 2019-20 accompanied with a rationale and clear risk assessment.

- ii. Future proposals for changes to the funding available to provide Public Health services should be accompanied by a clear risk and impact assessment, which is also made available to Health Scrutiny. Scrutiny should receive regular detailed updates on changes to mandated and prescribed Public Health functions.
- iii. The needs assessment for the range of alcohol service provision should be reviewed, with the aim of providing a user-friendly and accessible document which can easily be understood by non-specialists. This assessment should enable the Council to make informed decisions around the needs of York residents and tailor future service provision to meet this need.
- iv. To meet the needs of residents with multiple complex needs, we recommend partners adopt a joint commissioning approach across a range of specialist areas so as to produce a joined-up wrap-around support network; such an approach should be led by the Director of Public Health. It should include the CCG, CYC, North Yorkshire Police, Office of the Police and Crime Commissioner (OPCC) and CYC Adult Social Care. The approach should also involve a range of commissioned delivery partners such as Mental Health (TEWV), primary care (GPs), secondary care (hospitals, liver unit, A&E, ambulance service), the Probation Service, specialist substance misuse services, housing, Making Every Adult Matter (MEAM), Pathways, Salvation Army and voluntary sector community groups.
- v. In order to implement such an approach, we recommend a senior commissioning level strategic group be convened, facilitated by the Director of Public Health, to provide a cohesive approach. This should include the pooling of budgets for joint commissioning. The aim should be to meet needs in one single joined-up service offer rather than a patchwork approach to provision. A proposed model for a *York Substance Misuse Commissioning Strategy Board* can be found in Annex I to the Final Report at Appendix 1.

## **Analysis**

8. The Director of Public Health wishes to make the following comments in response to the recommendations:
  - i. The decision to reduce the public health budget allocation to substance misuse services was made taking into account the

priorities across all areas of public health. All public health services have had their budgets reduced since 2014/15 in response to the cuts in local authority public health grant allocations. There are significant risks to considering the investment in substance misuse services in isolation and it is strongly recommended that any additional investment should not be made at the expense of other areas of statutory public health service provision, for example sexual health, delivery of NHS Health Checks, 0 -5 child public health services. The Director of Public Health is, therefore, not in a position to support the recommendation that funding be returned to substance misuse provision on a recurring basis from the ring-fenced local authority public health grant allocation since this will have a potential financial impact on these services. It is important to note that despite the cuts in funding the Council is making progress on tackling substance misuse issues, working with our partners to improve treatment and recovery outcomes and putting in place measures to reduce the problem of discarded needles through improved distribution of needle bins and signposting to needle exchange schemes.

- ii. The scrutiny task group were led to believe that a risk assessment of the potential impact of the budget to substance misuse services was not undertaken. However I am pleased to report that this is not correct and the funding proposals for substance misuse services were based on a sound rationale, clear risk assessment and informed by a detailed Community Impact Assessment. The risks and mitigations were clearly set out in reports to Health and Adult Social Care Policy and Scrutiny Committee and Executive on 19 July 2016 and 25 August 2016 respectively. This showed that there is a potential negative impact of the reduction in the budget available for substance misuse services but this is mitigated by the approach being used for the re-procurement and proposals for development of a new service delivery model. The 'summary of risk assessment 2014/15' included as Annex F was an internal document submitted to the, then, Acting Director of Public Health which was never signed off. It is a draft document and therefore needs to be interpreted with caution.
- iii. The Director of Public Health is happy to support the recommendation that the needs assessment for the range of alcohol service provision be reviewed and published as an

accessible document that can be used to enable the Council to make informed decisions around the needs of York residents and future service provision.

- iv. There are already a number of multi-agency Strategic Partnerships across the City which include a focus on the needs of residents with multiple complex needs. Given the limited capacity in both statutory services and the voluntary sector it is proposed that further work be undertaken to establish whether there is an existing group that can take forward a more joined up approach across agencies. The Strategic Joint Commissioning Group is already established as part of the governance arrangements for the Health and Wellbeing Board. This group is comprised of senior membership from the Council and the CCG and is in the process of developing priorities for joint commissioning. It is proposed that an initial report is presented to the Health and Wellbeing Board before a decision is made to establish another strategic commissioning group with a single focus on substance misuse services.

### **Implications**

9. In addition to the implications outlined in the final report at Appendix 1 other implications have now been identified, information on which was not available when the final report was published.

### **Financial :**

10. On 14 February 2019, after the final report and its recommendations had been agreed by the Health, Housing and Adult Social Care Policy and Scrutiny Committee, Budget Council approved the use of £100k of funds previously set aside in a Public Health Grant Reserve, to fund one-off investment in substance misuse. This meant that agreed savings of £213k in public health expenditure, from £2,158k in 2018/19 to £1,945k in 2019/20, was reduced to £113k.
11. There are no agreed proposals for how to spend the £100k put back into the substance misuse budget for 2019/20. This decision will be made based on a business case in line with Council finance and contract procedure rules.

### **Equalities:**

12. The Director of Public Health wishes it to be noted that a comprehensive Community Impact Assessment was completed to consider the potential

impact of the reduction in the budget for substance misuse services. This was published alongside the report to Executive on 25 August 2016 for a decision to re-procure alcohol and drug treatment and recovery services. Overall the new service was assessed as having a positive impact on equalities.

### **Risk Management**

13. The risks associated with this review are outlined in the final report at paragraph 71. However any decision to put additional resources into substance misuse must take into account the potential negative impacts to other areas of statutory public health services provision and should not be made in isolation.

### **Council Plan**

14. The Review directly relates to A Focus on Frontline Services priority in the Council Plan 2015-19 in that it will help ensure all residents, particularly the least advantaged, can access reliable services and community facilities.

### **Options**

16. Having considered the final report at Appendix 1 and its associated annexes, the Executive may choose to amend and/or approve, or reject the recommendations arising from the scrutiny review.

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**Wards Affected:**

**All**

**For further information please contact the author of the report**

**Background Papers: None**

**Appendices:**

**Appendix 1 – Substance Misuse Review Final Report**

**Abbreviations**

A&E- Accidents & Emergency

CYC- City of York Council

CCG – Clinical Commissioning Group

MEAM – Making Every Adult Matter

OPCC- Office of the Police and Crime Commissioner

TEWV- Tees, Esk, Wear and Valleys NHS Foundation Trust