

## **Health & Adult Social Care Policy & Scrutiny Committee**

Report of the Office of The Director Of Public health

## **Substance Misuse Scrutiny Review Recommendations follow up Report**

#### **Summary**

1. This report presents the progress against the recommendations supported at Executive on 18<sup>th</sup> March 2019 following the Substance Misuse Scrutiny Review undertaken by members.

# **Background**

- A full review of the Substance Misuse (Alcohol and Drugs) offer in City of York was undertaken in 2018/19 by members. This review was undertaken in the context of budget cuts to services and analysing the impact of those cuts.
- 3. The review was widely consulted on meeting with academics, GPs, Vale of York Clinical Commissioning Group (CCG), York Teaching Hospital NHS Foundation Trust, CYC Finance Officer, CYC Public Health Practitioner, the Police and Probation services and the Specialist provider and contract holder Changing Lives.
- 4. The full report identified a number of areas which would have a negative impact on residents and impacted on the ability to provide services. The report proposed recommendations to mitigate the impact of savings.

# **Progress against recommendations:**

5. The following template outlines the five supported recommendations and the progress against them.

	Recommendation	Implementation September 2019
1.	The financial cut to the substance misuse budget should be reassessed 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.	<ul> <li>Three separate work streams have taken place.</li> <li>a. A release of £100k non recurrent PH reserve funding was passed to the provider within the terms of the existing contract</li> <li>b. A one off release of £100k emergency fund has been agreed subject to a business case from the provider</li> <li>c. Discussion with counsellors regarding the longer term sustainable funding position which is subject to agreement.</li> </ul>
2.	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.	A clear risk/impact assessment process is in pace for public health services and these are shared with key documents where changes are proposed.  Any changes to the Public Health offer would be discussed as part of change management process within CYC policy and procedure. This would form part of any member briefing/update and where deemed necessary would form part of the scrutiny work plan.
3.	The needs assessment for the range of alcohol service provision should be reviewed, with the	The Joint Strategic Needs Assessment steering group will be leading this process and are considering 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.	resources required within CYC and partner organisations to undertake this task.
4.	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 wraparound 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.	A multiple complex needs group was formed by a number of partners to address this issue at the same time the recommendation was made.  A decision was taken to actively engage in the existing network and work plan rather than duplicate. After discussion the partnership was expanded to include criminal justice partners.  The long term aim is to unpack the strands, develop cohesive operating models for front line delivery alongside joined up commissioning, retaining focus on this vulnerable resident group.
5.	In order to implement such an approach, we recommend a senior commissioning level strategic group be convened, facilitated by the	See above

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.

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