



**Open Report on behalf of Glen Garrod,
Executive Director - Adult Care and Community Wellbeing**

Report to:	Adults and Community Wellbeing Scrutiny Committee
Date:	11 January 2023
Subject:	Substance Misuse Treatment Performance

Summary:

This report provides an overview of the services provided by 'We Are With You' and presents recent performance data for the Substance Misuse Treatment Service. The report is focused on alcohol outcomes and explores how the number of people presenting to services for support with alcohol issues has changed over the past three years, how the options for people to get support from different services in Lincolnshire has had a direct impact on successful completions from the structured treatment service, and how the global pandemic has affected service delivery.

Actions Required:

Scrutiny are asked to note the information in this report, which has been produced for information.

1. Background

Since the Health and Social Care Act 2012, Lincolnshire County Council has been responsible for the treatment of substance misuse issues across the county. Lincolnshire County Council currently commissions Substance Misuse Treatment and Recovery services through contractual arrangements with We Are With You (With You), a registered charity, for which contracts are due to end on 31 March 2024. With You have been a commissioned service provider in Lincolnshire since 2002.

The Substance Misuse Treatment contract delivers drug and alcohol services (including evidence based clinical and psychosocial therapies) to adults and young people, reaching in the region of 3000 service users every year. Each individual service user has a tailored recovery package that may include brief advice, structured psychosocial interventions, substitute or relapse prevention medication, medically managed detoxification, or residential rehabilitation. There is a suite of group work sessions available, and each site also has peer mentors to support new and existing service users. A countywide harm reduction service offers a needle syringe programme, Naloxone training and dispensing

and blood borne virus screening on a drop-in basis. For young people, a school's prevention service supports education around many substances and the harms they pose.

Through a sub-contracting arrangement with Double Impact, With You have worked to increase recovery capital¹ for their service users by promoting and supporting individuals into full recovery, connecting with mutual aid services and through innovation with a recent art exhibition in partnership with the University of Lincoln.

Treatment Services

The treatment service for adults is flexible, facilitating access in many locations across the county including local hubs, community centres and outreach services to enable local access across Lincolnshire where transport links may be difficult. Workers have state of art communications and I.T. equipment that makes agile working easier and improves the efficiency of the service, as due to the rural nature of Lincolnshire, access to the hubs can be difficult for some service users. This was essential during the pandemic to ensure the service continued while keeping staff and service users safe.

The treatment service is monitored through an extensive performance schedule over seven domains:

- Freedom from dependence on drugs or alcohol
- Improvement in mental and physical well-being
- Prevention of substance misuse related deaths and blood borne viruses
- A reduction in crime and re-offending
- Sustained employment
- The ability to access and sustain suitable accommodation
- Improved relationships with family members, partners, and friends

The service currently reports on 23 performance indicators each quarter, some including sub-indicators to differentiate between opiates and alcohol interventions or adults and young people. A total of 16 measures have established targets, recent data indicates that the service is on or exceeding target in 12 of these areas. An overview of recent performance across all indicators is included in Appendix A.

The treatment core contract is paid on a block amount of just over £5 million per annum with service credits up to 20% of the contract value aligned to the performance of 4 Key Performance Indicators:

- Increase numbers in effective treatment
- Reduction in clients re-presenting to treatment
- Waiting Times Adults and Young People within 3 weeks and under for Alcohol and Drugs
- Maintain Treatment Outcome Profile (TOP) Compliance

¹ Recovery capital is about developing meaningful relationships with recovery peers, parents, families, partners, friends, and neighbours. Purpose and belonging are integral to the maintenance of recovery and so the absence of meaningful connections and activities put sobriety at risk.

As Illustrated in Appendix A and Table 1 below the service has consistently met or exceeded target in all these key areas of performance with no service credits applied to these measures as a result.

An Annual Contract Review is in progress with the service which has a low-medium risk status associated with the 5 indicators that are currently below target. The previous Annual Contract Review conducted pre-pandemic, judged the service Good overall in line with the CQC findings in 2019 which graded the service as Good in all areas.

Recovery

In 2016 a new recovery service was commissioned to sit alongside and compliment the treatment service. With You, sub-contract this service to Double Impact, a Nottingham based charity, who have specialised in recovery since 1998. This service delivers a range of groups designed to connect people to a recovery network and empower them with tools and strategies to achieve a sustained and fulfilled recovery. Double Impact has an academy that offers accredited training packages to help those in recovery get experience and qualifications to gain employment and assist with reintegration back into society following periods of substance misuse, 54 people completed this programme in 2021/22.

The service aims to support people close to the end of clinical treatment and those that are abstinent from substances.

The service was impacted by the pandemic, with face-to-face support being impossible at times, however they continue to increase the numbers of people they support as detailed in Table 1 below.

Table 1: Current open clients to Recovery services

	2018/19	2019/20	2020/21	2021/22
Number of clients open to Recovery	355	379	505	699

In 2021/22 the recovery service also had 253 people attending groups, 178 accessing mutual aid and regular check ins were conducted with 562 individuals.

Treatment Service Performance

Performance and outcomes are monitored to ensure Lincolnshire County Council's investment is providing support to the community in the most appropriate way. Using the National Drug Treatment Monitoring System (NDMTS) and through quarterly contract review meetings between LCC and the provider, performance indicators are monitored closely throughout the duration of the contract. Overall, performance is consistently good, even with the impact of the global pandemic, increase in treatment population and with no increase in core funding.

In Lincolnshire, the whole treatment population has increased by 10.2% between March 2019 and March 2022. This trend is similar in England where the whole treatment population increased by 8.14% during the same period.

Table 1 shows overall progress against a range of performance indicators for the adult substance misuse treatment service.

Table 1: Current performance of the substance misuse treatment service

Performance Indicator	Target	Performance (Q4 20/21)	Performance (Q4 21/22)	Performance (Q1 22/23)
KPI_1.1 Increased numbers in effective treatment	> 85%	87.4%	87.2%	88.4%
KPI_1.2a Reduction in clients re-presenting to treatment (Opiates)	< 19%	12.5%	8.0%	12.5%
KPI_1.2b Reduction in clients re-presenting to treatment (Alcohol)	< 10%	9.7%	6.8%	8.1%
KPI_1.3a Waiting time under 3 weeks (Young People)	> 96%	100%	100%	100%
KPI_1.4 Maintain Treatment Outcome Profile (TOP)	> 80%	99%	99.0%	99%
PI_1.6a Increase in numbers of successful completions (Opiates)	> 5%	4%	4.0%	4%
PI_1.6b Increase in numbers of successful completions (Alcohol)	> 35%	33.1%	27.8%	26.3%
PI_1.9 Increase in % of clients engaged in treatment & mutual aid	> 20%	69.8%	65.8%	58.0%
PI_2.3 Number of dual diagnosis clients engaged in substance and mental health treatment	> 5%	9.6%	13.5%	8.6%
PI_3.1 Number vaccinated & treated for Hep B	> 15%	4.5%	6.9%	Not yet available
PI_3.2 Increase numbers offered testing for Hep C	> 85%	92.5%	91.8%	Not yet available
PI_3.5 Increase % of clients accessing services through hospital settings	> 2%	4.6%	6.8%	8.8%
PI_5.1c Decrease the number of young people not in employment or education	< 12%	10.9%	9.4%	1.7%

Successful Completions (Alcohol)

During 2021-2022, NDTMS reports show a decrease in the percentage of successful completions in the alcohol only cohort (see Table 1, PI_1.6b).

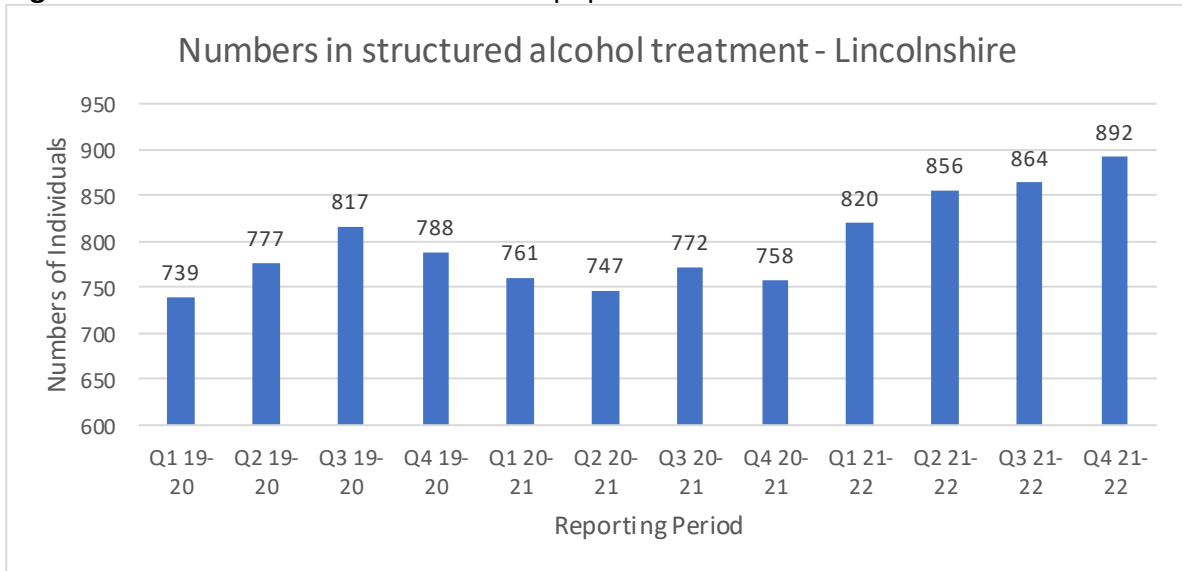
In recent years more people have been entering structured treatment.

Both locally and nationally there has been an upward trend in the number of people in structured alcohol treatment; however, this trend is more pronounced in Lincolnshire.

People in structured support for alcohol increased by 23.6% in Lincolnshire over 3 years (see Figure 1) compared to 12.5% in England. This significant increase has put pressure on the provider to deliver a consistently good quality service with increasing caseloads.

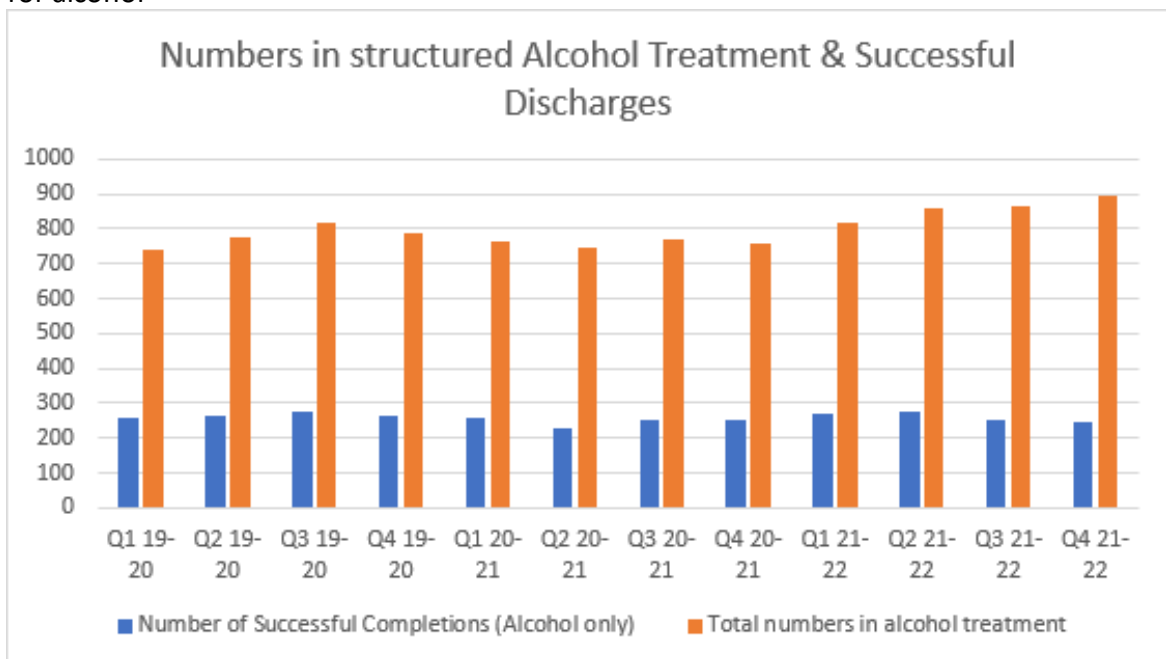
The actual number of successful alcohol discharges has remained consistent over several years (see Figure 2 for a comparison of discharges and the number in treatment). As the percentage of successful completions is affected by the total number of treatment, this has resulted in a reduction in the percentage of successful discharges.

Figure 1: Lincolnshire’s alcohol treatment population size



Source: Office for Health Improvement and Disparities (OHID), National Drug Treatment Monitoring System (NDTMS) Adult Quarterly Activity Partnership reports

Figure 2: Successful completions for alcohol compared with the total number in treatment for alcohol



Source: Office for Health Improvement and Disparities (OHID), National Drug Treatment Monitoring System (NDTMS) Adult Quarterly Activity Partnership reports

There are several reasons that contribute to the decrease in the percentage of successful alcohol completions in recent quarters, including:

- The impact of COVID-19 on complex alcoholism
- Workforce challenges within We Are With You
- Alcohol support available through One You Lincolnshire

Impact of COVID-19 pandemic and complex alcoholism

The increase in the number of people in treatment started during the pandemic and is reflected both nationally and locally. During the COVID-19 pandemic, people significantly changed their drinking habits, shifting places of consumption from bars and restaurants to home. Data from a Government consumer purchasing panel measured off-trade volume sales of alcohol and showed that between 2019 and 2020 (before and during the pandemic), volume sales increased by 25.0%

During the lockdowns, women, parents of young children, people with higher income and those with anxiety and depressive symptoms reported the highest increase in alcohol consumption. Emergency calls about domestic violence, for which harmful alcohol consumption is a risk factor, rose by 60% in EU countries.

Locally, this has been reflected in the level of complexity which people who misuse alcohol are presenting to specialist substance misuse services. 70% of the presenting individuals are drinking at hazardous or harmful levels meaning they are consuming over the weekly recommended amount putting themselves at risk of immediate or longer-term harm and pharmacological treatment is more likely to be required due to physical dependence. Stabilising these individuals into structured support and helping them to build their recovery capital takes longer and the need for more intensive support is greater, putting pressure on the service.

Some of these individuals are likely to drop in and out of services without progressing in a structured way due to their multiple overlapping needs on top of their alcoholism, including mental health, housing, and physical health issues. With You will coordinate with other services to support individuals in a holistic way; however, for some people it will take several attempts to engage which means the services have to be flexible, available, and responsive to people which creates fast paced, high intensity, high volume caseloads.

Provider Workforce Challenges

During the past 2 years the impact of the pandemic, coupled with more recent cost of living pressures, has not only had an impact on the service users in our communities but also on the workforce. There have been unprecedented numbers of vacancies throughout the service with some people leaving the sector while others moved on to promotions within the service or other opportunities within the sector. This put pressure on all the staff who saw their caseload numbers increase. Morale amongst the workforce was reported to be low with pressure from caseload sizes, increased complexities of service users, managing and prioritising risk and possibly being personally impacted by the pandemic.

The leadership team was also impacted as they too had to support service users directly in order to safeguard their team's wellbeing and ensure the service continued during this time. This saw a change in priorities while aiming to keep the people they support safe. This meant that checks to ensure the accuracy and quality of case management were not being done in depth by the leadership team which had a direct impact on people being moved through treatment. At times first line staff were advised to prioritise risk and safety of the most vulnerable people on their caseloads, which meant some individuals who presented stable or with fewer risk factors were engaged with less frequently. Without leadership oversight of caseloads (that help staff to reflect and review individuals' treatment journeys) this resulted in people remaining in treatment for an extended period when they would have been supported into recovery in a more timely way ordinarily.

Recruitment has been a challenge across the industry at a national level. There is a shortage of appropriately qualified workers as well as individuals newly attracted into the field. Additionally, national government grant funding has generated new specialist posts within the services. These posts have attracted existing staff away from generic posts (e.g., supporting alcohol clients) and have led to gaps in core staffing due to difficulties backfilling posts. Organisationally, With You recently reviewed the competitiveness of their salaries to attract a better quality and quantity of applicants, which has helped with recruitment.

Once an individual is in post, With You has a robust induction and probationary support package, meaning that there is at least 6 months of time needed to invest in each staff member to ensure they are supported, and their knowledge and skills are developed before they take on a full caseload. This creates a delay in outcomes.

With You however are now reporting that with increased staffing, the teams currently feel better supported and morale is increasing. The leaders can support their teams more effectively through quality auditing and case load management checks are being completed more frequently and robustly. This in turn is impacting on the numbers of successful discharges starting to come through in recent months.

Through caseload auditing in recent months, it was identified that some individuals were commenced on clinical interventions and remained in pharmacological treatment for extended periods of time. While for many this meant they achieved abstinence, the prescriptions were not transferred to primary care and in some cases are not able to be transferred to primary care due to the lack of coproduction between services, resulting in people not being discharged from structured treatment. This is being dealt with locally by getting GP agreement prior to clinical treatment commencement, having a treatment end date (no longer than 6 months), and ensuring the service user is fully aware of the transfer of care when necessary.

Recently alcohol specialist workers have been introduced into 3 hubs which will mean more focus on this area for these staff rather than a mixed caseload. This will also help to develop increased knowledge around the detoxification and rehabilitation pathways and routes into the recovery support service. Exiting people from treatment at the correct time and with the correct recovery aftercare packages is vital in order to reduce people representing in the future.

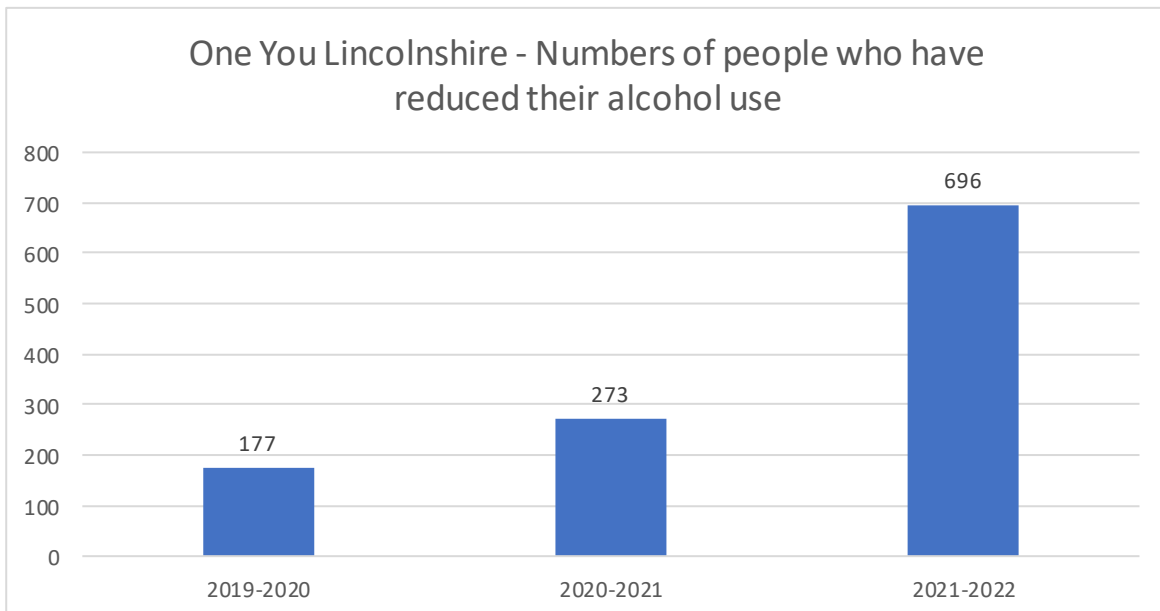
One You Lincolnshire

One You Lincolnshire is a commissioned Integrated Lifestyle Service that supports people with non-hazardous, non-physically dependent alcohol issues. Since their launch in 2019 they have supported increasing numbers of people around alcohol misuse, who would have previously been supported by With You. This cohort are more likely to be functioning individuals who are better able to engage in short duration programmes and make changes to their drinking habits through psychosocial & self-guided packages.

During 2019-2022, One You supported 1033 people around their alcohol use, with 756 people (73.2%) reporting reducing their drinking to less than 14 units per week or by a reduction of 50% of their weekly unit total (see Figure 3).

Prior to the launch of One You Lincolnshire, a number of this cohort would have been supported though extended brief intervention programmes in structured alcohol treatment through With You. This cohort are unlikely to have needed clinical treatment and would have been more able to engage in group work, and then been supported in the onward referral pathway to the Double Impact recovery service. These individuals would previously have been captured in successful completion figures for With You.

Figure 3: One You Lincolnshire's numbers of people who have reported a reduction in their alcohol use by 50% or to less than 14 units per week, 2019-2022



Source: One You Lincolnshire

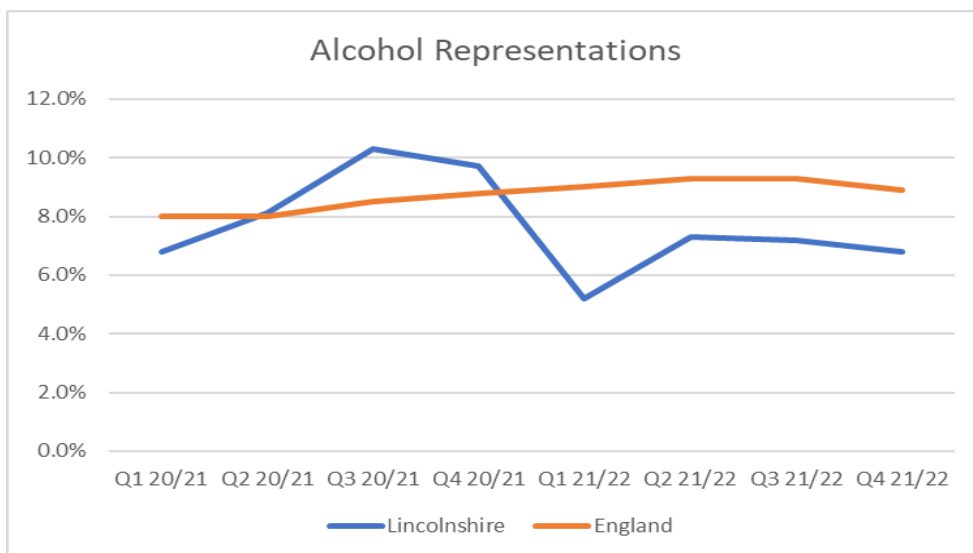
Other Notable Performance Indicators

Representations

Alcohol representations are measured as a percentage of the successful completions that represent within a rolling 6-month period (see Table 1, KPI_1.2b). The lower the number, the fewer people are coming back to services needing additional support following discharge. Nationally, it is accepted that this reflect people who are likely to be stable in their recovery.

In Lincolnshire, alcohol representations have been consistently below the England average, with exception of a spike during Q3 of 2020 which coincides with a lifting of national lockdown. The partnership work with Double Impact to move people into recovery support appears to be reflected in the representation data (see Figure 4).

Figure 4: A comparison between Lincolnshire & England representations, as a percentage of the successful completions, 2020-2022



Source: Office for Health Improvement and Disparities (OHID), National Drug Treatment Monitoring System (NDTMS) Adult Quarterly Activity Partnership reports

Successful Completions (Opiates)

Workforce and caseload management issues during recent years, as highlighted above in relation to successful alcohol completions, have also impacted on the numbers of people successfully discharging from opiate treatment. Complexities have increased over time due to an aging opiate using population, who are more likely to have multiple comorbidities.

Changes to clinical and psychosocial processes during the pandemic focussed on keeping people safe and managing immediate risk therefore there was less focus on supporting people towards exiting services.

Number vaccinated & treated for Hep B

After several years of successful countywide campaigns to vaccinate the treatment population and provide access to Hepatitis B treatment, the numbers of people now requiring vaccination is fewer. Individuals that have not had the vaccination are likely to be the harder to reach, difficult to engage cohort who will benefit from future initiatives including an outreach provision.

Numbers engaging in Employment or Education

This target is for management purposes and indicates how well the wider system is performing overall. For the treatment service this shows how well those in treatment are recovering and gaining meaningful employment. Opiate clients are the least likely to have sustained employment with greater than 30% being an aspirational target with a national average of 24%.

2. Conclusion

Overall, We Are With You have performed well against the KPIs within the Treatment contract and have supported positive outcomes for individuals throughout the Recovery contract. The Council has a constructive and strategic relationship with the Provider which helps us to manage challenges when they do arise, as well as to make the most of emerging opportunities. This was evident during the pandemic when delivery and support mechanisms had to be adapted swiftly and in more recent engagement over co-designing initiatives to deliver the priorities within the additional grant funding from OHID and DLUHC.

Where there have been challenges around specific performance indicators, particularly around successful alcohol completions, these were identified early and are being monitored through contract management activities. An internal alcohol improvement plan was created by the service to increase successful alcohol discharges across the service going forward. This has included a review of the whole caseload, a review of pathways into and out of clinical treatment and a review of how staff are supported through quality checks and regular auditing by their line manager.

Leaders at With You have shared that, on the ground, the actions being completed on the improvement plan to increase alcohol discharges are starting to come into fruition. This is also reflected locally in discharge figures for September 2022 and October 2022 with data analysts reporting an increase in the discharge percentage month on month. That said, this data is not yet available through NDTMS and so is not reflected in the most recent official figures reported

3. Consultation

a) Risks and Impact Analysis

N/A

4. Appendices

These are listed below and attached at the back of the report	
Appendix A	Performance Overview Substance Misuse Treatment
Appendix B	Case studies

5. Background Papers

No background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

This report was written by Lucy Gavens, who can be contacted on Lucy.Gavens@lincolnshire.gov.uk.

This page is intentionally left blank