

Information briefing

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Report to: Health and Social Care Overview Scrutiny Committee

Date: 20 October 2015

Title BIRMINGHAM SUBSTANCE MISUSE RECOVERY SYSTEM, CRI
(CRIME REDUCTION INITIATIVE) – 6 MONTHS INTO NEW
CONTRACT

1. Background

- 1.1 Birmingham City Council has re shaped and re procured the adult drug and alcohol treatment system into a new whole systems 'recovery' service. Cabinet approved the award of the contract to the third sector organisation Crime Reduction Initiatives (CRI) following a procurement process. The new contract commenced on the 1st March 2015. This report serves as a 6 month review.

2. Three Key Commissioning Intentions

2.1 Think Family Focus

The new recovery system is targeting individuals posing the highest levels of risk due to their drug and alcohol misuse. This includes risk to themselves, to their families and to the wider community. The new service actively seeks to support families during the recovery process. Child safeguarding is of primary importance.

2.2 Recovery Outcomes

The new recovery outcomes will be achieved by the following:

- Reductions in re offending
- Improved Housing
- Improved Parenting/Effective child safeguarding/Reduction in related domestic violence
- Increased levels of Employment
- Improvements in physical and mental health
- Reduction in sexual health problems and blood borne virus's

2.3 A Single System

The new recovery service has been procured through a single contract which includes a supply chain with third sector organisations able to engage with the diverse communities of the city including BME, LGBT, as well as women only services.

3. Safety / Quality / Outcomes

CRI service delivery commenced on the 1st March with a well-resourced team to mobilise the contract. CRI followed a three stage implementation process, focussing on:

- 3.1 **Safety** – CRI needed to undertake the transfer of over 3000 scripts from the previous providers. These scripts were predominantly for the drug Methadone which is a Heroin substitute. This was completed successfully with a low error rate. This stage also included the systematic reassessment of all service users to ensure that recorded information was both accurate and standardised in line with CRI policies and procedures. Ensuring that child safeguarding assessment information was both complete and accurate was of paramount importance. All service users with children are receiving a home assessment.
- 3.2 **Quality** - This stage primarily focusses on assessing the competences of the workforce and then forming the appropriate individualised development plan to rectify any deficiencies. A focus on the team's adherence to CRI's operational policies and procedures is central to this process, also with a particular focus on child safeguarding.
- 3.3 **Outcomes** – This stage is concerned with the achievement of the recovery outcomes as listed in this briefing. The contract management data return processes are to track the achievement of the outcomes.

CRI are currently at the quality stage moving into the achievement of the outcomes.

4. Outcomes

4.1 Child Safeguarding

Considerable work has been carried out to provide a gold standard approach to Child Safeguarding. This includes the following:

- CRI have developed an active partnership with MASH and have their team leaders sat within MASH to advise and assess cases.
- Child Protection Master classes delivered to CRI staff by BCC Social Care.
- Child Protection social worker consultancy surgery onsite at CRI premises.
- The Safeguarding toolkit (protocols, proformas & forms, contact details and top tips) has been disseminated to staff.

- Revision of Child Safeguarding activity and quality performance indicators to ensure that reporting is more robust and reflective of the service.
- All service users were re-assessed and reviewed to ensure that information was up to date and accurate.
- Home assessments are being undertaken for all service users with children.
- A heat map of prevalence of child safeguarding concerns based on service user assessment has been produced which has been utilised to inform service delivery.
- A Joint Working Protocol between CRI and BCC Children's Services has been developed to facilitate referrals and information sharing.
- CRI in Birmingham has put itself forward as a pilot site for ADFAMs research into Opioid Substitute Medications in Drug Treatment: Tackling the Risks to Children. A multi stakeholder meeting took place on the 28th September to start this process.

4.2 Family Involvement

- 4.2.1 As part of the contract it is a requirement that wherever possible and appropriate there is family or social network involvement in every individuals structured intervention. Data shows a steady increase in the number of service users involving family members in their recovery interventions. This is likely to increase further and performance against this activity is linked to Payment By Results (PBR).
- 4.2.2 Data reveals that of the present cohort of current service users 17% have been identified as having some form of safeguarding issue. CRI recently completed an internal audit to ensure that safeguarding processes and protocols were being followed; e.g. discussed as routine items at team meetings, etc. They have also completed a Section 11 Audit for the Birmingham Children's Safeguarding Board submitted in September.

4.3 Reductions in Re-offending

Clear strategic and operational links have been made with all key partners in this field including the Police, Probation and the newly formed Community Rehabilitation Company. Clear strategic and operational links are ensuring that those arrested for a drug or alcohol related offence receive the appropriate intervention from CRI.

4.4 Improved Housing

CRI's housing partner, Stonham, have mapped provision across the city and have been forging links with the housing sector linking in with CRI's staff teams, to ensure housing need is being addressed within recovery plans. Data indicates that more work is required to fully capture housing related interventions. This work is in progress and it is expected that Quarter 2 data will provide a greater understanding of the level of housing related need and benefits of engagement.

4.5 Increased Levels of Employment

- 4.5.1 CRI has started several initiatives to ensure that access to employment is maximised. This includes ongoing work with their partner YMCA around employment, training education and volunteering opportunities. CRI have also established links

with Job Centre Plus and have a presence in a selection of job centres where they are able to offer specialist advice and deliver brief interventions.

- 4.5.2 CRI have also established a partnership with the organisation Changes UK who run the employment centre 'Recovery Central' in Digbeth. Changes UK provide training and employment opportunities to people who have had substance misuse issues. Recovery Central has attended CRI team meetings to ensure staff are aware of the offer and that clear referral pathways are established.
- 4.5.3 CRI are in the process of developing an Employment strategy to take in to account the key partnerships that have been identified and to set out how they will achieve the outcome of sustained employment for service users.
- 4.5.4 A new Employment forum has been established with other interested partners across the city, e.g. CRC/National Probation Service and other employment/training related third sector bodies which CRI chairs.

4.6 Improvements in Physical and Mental Health

4.6.1 Dual Diagnosis

CRI have developed a dual diagnosis protocol with Birmingham & Solihull Mental Health Foundation Trust (BSMHFT). The purpose of the protocol is to provide a treatment pathway for people who have both a mental health diagnosis and substance misuse problems.

4.6.2 Acute Sector

CRI have developed links with the four main hospitals in Birmingham to ensure that there is adequate support for people admitted with substance misuse issues and that there are the necessary pathways into community provision. CRI consulted with the hospitals on the proposal that the focus of their work is mainly on the alcohol agenda. This has been positively received, and work is underway to rebrand the service, including development of targeted promotional materials.

4.6.3 Primary Care

- CRI have established effective relationships with GP's and Pharmacists. GP's continue to receive support from the substance misuse GP's that provide both leadership and a clinical governance function to the 70 practises involved in the scheme. A Lead Pharmacist performs a similar function for contracted pharmacists.
- The inherited contracts with GP and Pharmacists are currently under review. The first consultation meeting took place at the beginning of September. Changes that have been proposed focus on quality assurance measures which support the new recovery agenda.
- Annual training for GPs is due in October and will include discussions on a clearer focus on the recovery agenda, Hepatitis C, Alcohol, Naloxone and initiating prescriptions. Pharmacist training took place in September and focussed on the introduction of a competency framework in line the CRI contract.

4.6.4 Reduction in Sexual Health Problems and Blood Borne Virus's

- CRI have established links with the recently procured Sexual Health provider for Birmingham, Umbrella. Individuals with substance misuse problems are a high risk group regards their sexual health so screening, testing and treatment pathways and protocols are being developed.

5. Single System

A Single System

5.1 Contract Management

- Regular contract meetings take place between commissioners and CRI. Contract Review meetings occur once a month. In addition to this there are fortnightly operational meetings to ensure that the new system is bedding in. These started off as weekly meetings but were recently revised to fortnightly now that commissioners are more assured that the new system is settling down.
- Reporting on performance occurs on a monthly, quarterly and annual basis.

5.2 Supply Chain & Grants

CRI have implemented a broad and diverse supply chain, consisting of both formal sub-contract arrangements and grant agreements. The supply chain covers key areas of the contract including;

- Housing pathways
- BME engagement
- Family support
- Employment support
- Mutual Aid and peer support groups
- Criminal Justice employment programme

5.3 Partnership Working

- CRI have been developing a broad range of links across the city, with particular emphasis on mental health, employment, safeguarding, criminal justice, housing, acute and primary care sectors.
- A variety of forums have been established to work jointly with other agencies and organisations these include;
 - Employment
 - Legal Highs
 - Safeguarding
 - BME

6. Service User Engagement

- 6.1 CRIs partner, Emerging Futures, has taken on responsibility for developing and supporting service user involvement, including the development of a new Birmingham Service User forum which is inclusive of and representative of the service user population. The forum will be a key stakeholder, providing both challenge and support to CRI.
- 6.2 In addition to this CRI have developed a Peer Mentoring scheme enabling service users to support the delivery of CRI services and support service users in accessing services. The first graduation ceremony took place in August 2015 and there are currently over 20 peer mentors with more to follow.
- 6.3 Other key areas in CRIs service user engagement strategy are;
- Treatment menu for service users
 - Ensuring all service users are involved in their treatment/care plans
 - Strong network of mutual aid and peer support groups
 - Service user representation at operational team meetings
 - Service user involvement in audit cycles/incident investigations with appropriate support

7. Cost Efficiencies

- 7.1 The new system realises cost efficiencies from a previous current budget of £24.7million per annum which supported a total of 28 contracts.

Substance misuse – projected efficiency savings			
	Annual contract value (£)	% saving against £20.3m cabinet report contract value	% saving against the 2014/15 spend on substance misuse contracts (£27.5million)
Year 1	18,940,786	6.7%	31.1%
Year 2	17,973,369	11.4%	34.7%
Year 3	17,973,369	11.4%	34.7%
Year 4	15,368,666	24.3%	44.1%
Year 5	14,855,339	26.8%	46.0%

- 7.2 A Payment By Results (PBR) mechanism is to be applied to a selection of key performance indicators. This is due to be implemented from the next contract year

(2016-17) onwards. The process of negotiating and agreeing the details of the PBR has already started and is due to be finalised by January 2016. The PBR elements are worth 10% of the annual contract value and apply to the area of employment, criminal justice, think family and successful completion of treatment.

8. Next steps

Going forward there will be a continued emphasis on maintaining and consolidating the 'Safety' and 'Quality' of the service while moving focus towards the achievement of 'Outcomes'.

There are a number of initiatives already in progress to achieve this. These include:

- a. **Marketing Plan:** A Marketing Manager has been employed to develop communication links, to raise the profile of CRI in Birmingham and disseminate 'good news stories'
- b. **Continued workforce development:** to ensure staff continue to be supported around key areas such as safeguarding, recovery outcomes and service user involvement
- c. **Service User Quality Assurance:** Supporting People Directorate is leading on a programme of service user led quality assessment of CRI's services in Birmingham. This work will be continuous and will last the lifetime of the contract.
- d. **Series of Audits:** Commissioners are planning a series of audits focusing on key areas of the contract. These include; safeguarding, workforce development, Acute sector partnership, employment agenda, prescribing and call centre effectiveness.
- e. **Implementation of the PBR:** the PBR will be implemented in the second year of the contract and this will focus the achievement on key outcomes including: successful completion of treatment, reduction in the number of re-presentations, sustained employment of service users, increase in family member engagement and reduction in crime and offending.
- f. **Consolidation of partnership groups/multi-agency forums:** Developing further the links that have been established in order to achieve strategic outcomes in relation to legal highs, BME groups, employment and safeguarding.

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