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| Contract title: | Adult Substance Use Disorder Services (SUDS) Drug and Alcohol treatment for adults 25+ years |
| Contract Number: | EC09/01/2722A |
| Service Provider(s): | Change Grow Live (CGL) |
| Commissioning Organisation: | SCC |
| Contract start date: | 01/07/2019 |
| Current contract end date: | 30/06/2024 |
| Maximum contract end date: | 30/06/2026 |
| Current financial year value £: | £2,239,454 |

Service Summary

This contract offers adult substance use disorder treatment to adult population (25+) in Southampton. This service works in tandem with the same service offered to young people up to the age of 24 (delivered by No Limits).

The service is harm reduction and recovery oriented, evidence based and tailored to meet the needs of individuals and communities in order to empower people to lead drug/alcohol free lives where possible. The service offers treatment to address alcohol, opiate and non-opiate use as well as the use of other drugs, such as prescribed medication, novel psychoactive substances and image and performance enhancing drugs. The service provides both medical and psychosocial interventions. and works co-operatively with the Young Peoples substance use service in order to provide clinical treatment for the 11-24 year age group, including pharmacological interventions, health screening, and Blood borne virus (BBV) screening and interventions.

Contract Performance

Throughout 2021/22, commissioners have worked with CGL to restore performance to pre-pandemic levels. There has been increased focus on ensuring that a realistic recovery trajectory is in place and is being monitored robustly by both providers and commissioners. The recovery trajectory is supported by an improvement plan which is reviewed regularly, and which covers areas of underperformance and areas that will improve quality and outcomes for service users, including areas that have been identified from service user feedback.

The 'successful completion' KPI's for this service are monitored nationally as well as locally, with the Office for Health Inequalities and Disparities (OHID) team offering support to Local Authorities where needed.

Based on available national reporting for the period Apr 21 – Jun 22, performance against targets for successful completions for opiate users, non-opiate users, and alcohol and non-opiate users combined have all recovered and now exceed pre-pandemic levels.

However, alcohol service users are still below the level they were at prior to the pandemic. Service managers and commissioners are working together to identify quality improvements with plans to implement an updated trajectory to achieve successful completions within the top quartile of Local Authorities.

Other areas which require further improvement are:

- Eligible service users (previously or currently injecting) in treatment having completed a course of HBV injections. The provider has recently targeted busy pharmacies and has taken treatment to service users in the “BBV van” alongside provision of harm education advice.
- People in structured treatment with identified use of opiates who have received overdose recognition and prevention/ intervention and been offered naloxone. The service recovery motivators will be undertaking outreach in the city with the help of a peer, to identify and offer naloxone to those without it.

There are also several areas where the provider is performing well, as evidenced through the national reports to the National Data Treatment Monitoring System (NDTMS), including:

- Proportion in treatment who were retained for 12 weeks or more or completed treatment within 12 weeks: 97.9%
- Waiting times (percentage of service users waiting over three weeks to start first intervention): 0% for opiates, non-opiates and alcohol and non-opiate users, and 1.2% for alcohol users.
- Harm reduction work and BBV testing and vaccination, whilst below local stretch targets are consistently above the national averages.

All of the KPI's and the data contained within the national reports is being closely monitored by both provider and commissioner. The commissioner is meeting with the provider Service Manager on a monthly basis to review the trajectory and to discuss progress in all areas. The commissioner also meets with the Area Operational Manager regularly to discuss developments and to review concerns around performance. In addition, performance is reported on and discussed in detail at each quarterly monitoring meeting. The provider has proved responsive to commissioners' concerns and has undertaken considerable analytical work and segmentation of the data to identify areas where improvements are required.

Commissioners will continue to work closely with the provider to update and achieve the actions detailed in the improvement plan and to achieve the best outcomes for service users.

Financial Data

The contract is paid on a block basis, i.e., the annual contract value is divided into 12 payments.

Southampton City Council has been successful in attracting additional national grant funding in order to expand and improve services to some hard-to-reach cohorts of service users such as offenders and rough sleepers. However, these specialist services are separate contracts with the provider.

The following service has been added to the main contract by way of variation.

Alcohol Extended Brief Interventions (EBI) Telephone Support:

Aim of the service: An extended brief intervention is motivationally based and can take the form of motivational-enhancement therapy or motivational interviewing. The aim is to motivate people to change their behaviour by exploring with them why they behave the way they do and identifying positive reasons for making change. The aims of the service are:

- to deliver telephone based extended brief Interventions for people with alcohol use disorders
- to reduce the harm of problematic alcohol consumption for people with alcohol use disorders, their families, friends, communities and the city.

The service is evidence based, free, non-judgemental and confidential. This is not an emergency service and nor is the service aimed at dependent drinkers, whose needs are likely to require more structured forms of treatment. People with alcohol dependence will be referred into CGL structured treatment services.

Additional contract value: The cost of the service is £65,000 per annum. The funding has been provided temporarily by the Public Health (Southampton) team from an underspend.

Future funding implications for SCC: The sustainability of the work will depend on a long term means of funding being identified. Commissioners are working with the Public Health Consultant and Senior Public Health Practitioner in order to achieve this.

The service commenced in August 2020 and funding has been agreed to support it until 31st March 2023.

Operational Issues and Good Practice

The provider demonstrates strong partnership work with other stakeholders and has developed good links with a wide range of providers in order to offer a holistic approach to recovery for many service users. Below are some examples of good partnership working in order to offer appropriate and holistic treatment and psychosocial interventions for individual service users:

- **In-Reach in Natalie House & Antelope House:**
Regular visits to mental health services Natalie House and Antelope House, providing support to residents and inpatients who are also CGL clients, as well as providing a pathway for new referrals.
- **Saints4sport/REFIT:**
The Saints4sport project has now been rebranded and is called REFIT. In order to promote healthy living, CGL supply a health care assistant to help run their gym session twice a week. At these sessions CGL promote the BBV service, offer free naloxone, smoking cessation advice, harm minimisation and signposting as well as general harm minimisation and substance use support and guidance.
- **Step to Wellbeing/SUDS Joint-Working Protocol:**
Steps to Wellbeing have worked with CGL and No Limits to develop a protocol which identifies pathways and provides clarity around suitable referrals. They have worked together to identify gaps and needs across both service areas.

SUDS and Steps to Wellbeing currently hold weekly meetings to discuss patients who were assessed by Steps to Wellbeing and come up with appropriate care plans.

- **Alcohol In reach Care Team (ACT) at SGH**

Regular meetings between CGL and ACT to discuss High Intensity Service Users.