



## **HEALTH OVERVIEW AND SCRUTINY COMMITTEE: 8 NOVEMBER 2017**

### **REPORT OF THE DIRECTOR OF PUBLIC HEALTH**

#### **SUBSTANCE MISUSE TREATMENT SERVICES**

##### **Purpose of report**

1. The purpose of this report is to inform the committee of the outcomes of the recent Care Quality Commission (CQC) inspection that was undertaken for Turning Point who are commissioned to provide substance misuse treatment services across Leicestershire and Leicester City. This report will also summarise current performance of the service as well as describe how Turning Point is engaging with key partners and what the service is doing about getting people back to work.

##### **Background**

2. In July 2016, Turning Point took over several pre-existing drug and alcohol services operating within Leicestershire and Leicester City to form the current substance misuse treatment service. For the purpose of this report, substance misuse refers to problematic drug use and alcohol dependency.
3. The service is commissioned jointly by Leicester City Council, Leicestershire County Council and the Office of the Police Crime and Commissioner. The service provides community based treatment/interventions to adults and young people in addition to providing services within Leicester Prison which are commissioned by NHS England.
4. The service operates through five hubs located across Leicestershire and Leicester City and includes the Criminal Justice team and the Young People's team.

##### **CQC Inspection**

5. As part of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, the service provided by Turning Point Leicestershire and Leicester was inspected in June 2017 by the CQC. Although substance misuse services are not currently formally rated by CQC, informal feedback from a CQC representative has indicated that the service achieved a 'good' rating.
6. The outcomes of the CQC inspection identified outstanding practice in managing the transition from eight separate independent drug and alcohol services around the City and County to one integrated service. The inspection also found several areas of good practice which are summarised in the quality report produced by CQC and are focused on safety, effectiveness, caring nature, responsiveness to people's needs and leadership. However, there were some issues highlighted, two of which were linked to legal requirements and therefore led to requirement notices being issued.

The first requirement notice was issued because *'staff had not labelled clinical waste bags in accordance with guidance and protocols.'* Turning Point has since remedied this by implementing a rota system to ensure compliance and by building the monitoring into their Clinic Audit process. The second requirement notice was issued because *'staff could not produce maintenance certificates for the stair lift at Granby Street. This meant no-one knew if the stair lift was safe to use or not.'* This has since been remedied and the certificate has now been added into the Safety Management System folder for the building. Both of these notices have been signed off by CQC as 'complete'

7. The inspection report also highlighted additional areas for improvement which are listed below alongside the progress to date:
- *The provider should ensure all ligature audits are complete and risk management plans are in place* - All were completed whilst CQC were on site. The audit for Eldon Street was reviewed and a couple of additional ligature points were identified and added immediately.
  - *The provider should ensure that client's privacy and confidentiality is maintained while using the needle exchange service in Loughborough* – This requires investigation to explore alternatives.
  - *The provider should ensure that staff update and document all risk assessments* – This issue was focused on some risk assessments not completed in a timely manner. This has been remedied by issuing fortnightly case management reports to all managers to flag overdue risk assessments. In addition, all staff have recently completed risk assessment and risk management training.
  - *The provider should ensure that all building repairs and maintenance at Granby Street is carried out in a timely manner* – Turning Point has a good relationship with the landlord and will continue to work closely to ensure that any works are up to date.
  - *The provider should ensure that staff regularly check and maintain first aid boxes* - These have all been checked and replenished.
  - *The provider should ensure that they have the required staff to develop a community detoxification service and enhance their physical health care activities in line with best practice* – Turning Point will be commencing the provision of community detoxes from November 2017. The first round of provision will be within Leicester City and this will be rolled out to the County by the start of next year. Service users from the County will be able to access community detox in the City with funding made available for travel if this is required.

### **Review of Service Performance**

8. Since contract award, the key priorities for Turning Point in the first year have been to mobilise to a sub-regional contract, receive staff from multiple services, consolidate various premises options, and continue to deliver interventions for adults and young people whilst setting down the governance processes.
9. A review of service performance takes place formally via monthly contract management meetings between Turning Point and representatives from Leicestershire County Council and Leicester City Council. The key areas of focus on performance are described below. The data presented is for Leicestershire residents only.

10. *Numbers in treatment & successful completions.* Helping people to overcome drug and alcohol dependence is a core function of any local treatment system. Although some individuals will require a number of separate treatment episodes spread over many years, most individuals who complete successfully do so within two years of treatment entry. During the 12 month period from 01/04/2016 to 31/03/2017, there were 1499 clients who received treatment, of which 14% successfully completed treatment to the point of being free of dependence. The latest data (01/07/2016 to 31/06/2017) shows that the number of clients receiving treatment has increased to 1716 and successful completions has increased to 15%. On breakdown of successful completions by specific categories (opiates, non-opiates, alcohol), the figures are similar to national figures.
11. *Representations (within 6 months of completing treatment).* During the 12 month period from 01/07/2016 to 30/06/2017, 10.6% of clients receiving treatment for opiate drug use re-presented. This is better than the top quartile range for our comparator local authorities. 5.9% of clients receiving treatment for non-opiate drug use re-presented which is similar to the top quartile range for our comparator local authorities. 3.8% of clients receiving treatment for alcohol dependency represented which is better than the national average of 8.5%. 10% of clients receiving treatment for a combination of alcohol dependency and non-opiate drug use re-presented which is similar to the top quartile range for our comparator local authorities.
12. *New presentations.* New presentations to the service have remained relatively stable at an average of 183 per quarter.
13. *Waiting times.* Individuals with drug and/or alcohol dependency need prompt help if they are to recover from dependence. Keeping waiting times low plays a vital role in supporting recovery in local communities. During the latest quarter (01/04/2017 to 30/06/2017), there were only 2 clients (1.3%) who had to wait more than 3 weeks for their first treatment intervention which is significantly lower than the national average of 2.9%.
14. *Early unplanned exits.* When engaged in treatment, individuals are less likely to participate in illegal drug use, commit less crime, improve their health, and manage their lives better, which also benefits the community. Preventing early drop out and keeping people in treatment long enough to benefit contributes to these improved outcomes. As people progress through treatment, the benefits to them, their families and the community start to accrue. In 2016/17, the proportion of early unplanned exits from treatment services compared with new presentations was lower than national figures for all client groups (opiate, non-opiate and a combination of alcohol and non-opiate) except the alcohol dependent client group where the proportion of unplanned exits was slightly higher (18%) than the national proportion of 14%.
15. *Young people's services* – Turning Point delivers specific interventions for young people under 18, and young adults 18- 25. This is provided in both a Young People's Hub in Leicester City Centre, and appropriate venues, and partner agencies across the county. Turning Point work closely with schools and colleges and are currently re-marketing their services. Numbers have remained relatively static throughout 2016/17 with 78 young people in structured treatment. There has been a decline in new presentations of young people in Q1 2017/18, and Turning Point are undertaking

further promotional work across the county to ensure partners are aware of the specialist service and pathways to support.

### **Engaging with Partners**

16. As part of the contractual requirements, Turning Point is expected to work with partners. This can take different forms dependent on local circumstances. For example, in Charnwood, where specific community safety concerns have been raised, Turning Point has worked in partnership with local police, district council officers, and local service providers to develop an action plan to address specific issues.
17. In Market Harborough, Turning Point has been involved in the Community Safety Partnership's 'Safer Christmas' campaign which focused on health and well-being during the festive period.
18. Turning Point has worked with community safety partners on matters involving vulnerable adults through attendance at the 'Vulnerable Adult Risk Management' meetings.
19. In Oadby and Wigston, Turning Point has been involved in a multi-agency group supporting a family with multiple physical and emotional health concerns.
20. Earlier in the year, Turning Point visited both Clinical Commissioning Groups within the County to raise awareness of the service.
21. Turning Point is involved in an outreach project in conjunction with Charnwood Borough Council and the Police. The aim of the project is to help people to access treatment, identify people in treatment who may have unmet needs, to reduce drug related litter and raise awareness of accessing safe disposal routes of drug related paraphernalia.

### **Employment Opportunities for Service Users**

22. Turning Point, with Leicestershire County Council, and Leicester City Council have recently submitted an Expression of Interest to take part in a national trial to develop drug and alcohol dependency Individual Placement and Support (IPS). This is an evidence based approach to supporting people with significant and complex disadvantage into employment. The IPS approach to employment support embeds employment specialists into clinical teams, providing support to individuals as they seek and return to work. The employment specialists become a core part of the multi-disciplinary clinical team and people receive intensive support in addition to support from Jobcentre Plus or other mainstream employment support providers. If the application is successful, the trial is expected to go live in April 2018 and will run for a 24 month period up until March 2020. This will be followed by a 12 month evaluation phase.
23. Turning Point are a member of the Leicester and Leicestershire Substance Misuse and Mental Health Employability Forum, alongside both councils, DWP, and local training/employment support providers. The purpose of the Forum is to develop pathways into employment for this client group.

**Background papers and Appendix**

Care Quality Commission Quality Report – Turning Point Leicestershire and Leicester – 5  
September 2017 [https://www.cqc.org.uk/sites/default/files/new\\_reports/AAAG7057.pdf](https://www.cqc.org.uk/sites/default/files/new_reports/AAAG7057.pdf)

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