

Report for Nottingham City Health Scrutiny Committee: 23 November 2017

Review of Inpatient Detoxification Services at The Woodlands

1. Introduction

1.1 This paper informs the Health Scrutiny Committee of the current work by Nottinghamshire Healthcare to review the detoxification inpatient services it provides at The Woodlands. It sets out the context and reason for the review and the proposed timeline. It asks the Committee how it wishes to be informed and involved in the next steps.

2. About the Woodlands Inpatient Unit

2.1 The Woodlands Unit is on the Trust's Highbury Hospital site in Nottingham. It provides short stay detoxification inpatient services for people with drug or alcohol dependence. It has 15 beds and provides care and treatment to adult service users whose withdrawal symptoms are so severe they require 24-hour inpatient care.

2.2 Appendix A provides more information about the service at The Woodlands.

3. The background and context to the review

3.1 The costs of providing inpatient services at The Woodlands currently run at about £2m per year. These costs far exceed the income the Trust receives for the services there and this position is worsening.

3.2 Last year, the Unit made a financial loss of £692,000 and is projected to make an even greater loss of £837,000 this year. (These losses are based on covering the full cost of Trust allocated overheads).

3.3 A significant factor for the Unit was the loss of its £567,000 pa contract for inpatient provision for Nottinghamshire County in October 2014. This was the equivalent of 6.5 beds.

3.4 As a result, in order to ensure we could retain a local service, the Trust sought new commissioners for the Unit to cover costs. This has resulted in having multiple contracts with differential pricing.

3.5 The Unit currently has six contracts:

Commissioner
Nottingham City Council
Leicester City Council
Leicestershire & Rutland Councils
East Riding of Yorkshire Council
Derbyshire County Council
Derby City Council

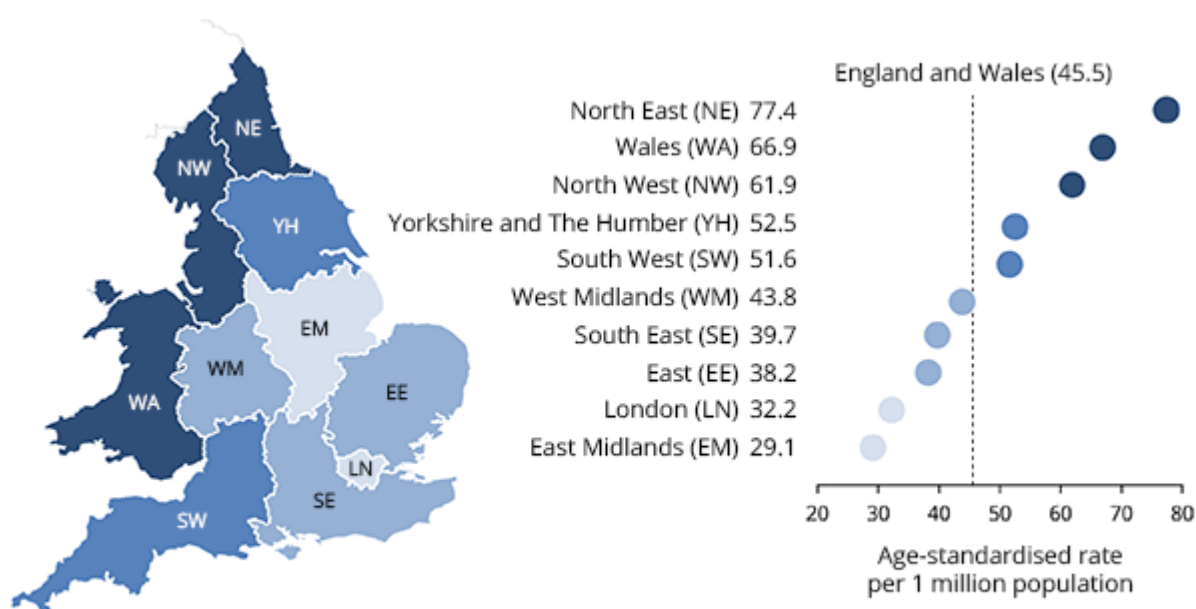
- 3.6 Though new contracts were secured they still do not cover costs. And all local authorities continue to seek expenditure reductions due to the financial pressures they face.
- 3.7 Our contract income for The Woodlands inpatient services has reduced from £1.4m to £1.1m over the last three years (including the forecast for 2017/18).
- 3.8 The Trust cannot continue to run the current service model at the Woodlands Unit within the available resources. The financial losses have to be covered by the Trust and this jeopardises other services.
- 3.9 Therefore, at its August 2017 meeting, the Board of Nottinghamshire Healthcare took the decision to consult on the closure of the Woodlands Inpatient Detoxification Unit and look at developing a new service model.

4. Provision for Nottingham City patients

- 4.1 Nottingham City Council is one of the largest commissioner of the Unit and, amongst the Unit's commissioners, pays one of the highest prices for an occupied bed day (OBD).
- 4.2 The City activity plan is 1175 'occupied bed days' per annum, which equates to about four beds at 85% occupancy. City commissioners have been reducing their inpatient activity over the past few years because their model relies on community detox, keeping the inpatient setting for the most complex patients that cannot be detoxified in the community.
- 4.3 As part of its service review the Trust has to understand the patient complexity associated with each contract. Looking across a range of different measures and indicators of complexity and acuity associated with the care of patients with substance misuse, analysis of the Woodlands data demonstrates that patients referred from Nottingham City have the most complex needs.
- 4.4 Our data show that City patients represent about one third of admissions but account for almost half of the 'incidents' on the inpatient unit – these incidents include, for example, self-harm; violence or disruptive behaviour; falls etc. This mirrors the sense of the clinical team that Nottingham City patients:
- present with the greatest clinical risk
 - are more likely to not attend or to cancel their planned admission, and
 - have a higher rate of self-discharge against medical advice.

- 4.5 There are likely a number of factors that contribute to this. The clinical view is that Nottingham City community substance misuse services are caring for the less complex patients efficiently in the community setting, referring only the most complex to inpatient care. This way of working is considered best practice in National Institute for Health and Care Excellence (NICE) guidelines.
- 4.6 In Nottingham, the majority of detoxifications are carried out in community settings, with services able to support this. The Woodlands inpatient service is therefore utilised for those in crisis or ill health and in need of stabilising their substance misuse.
- 4.7 The East Midlands has lowest rate of drug related deaths in the country – see below.

Age-standardised mortality rate for deaths related to drug misuse, by country and region, registered in 2016



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5. Details of the review

- 5.1 The Trust has instigated a review which is primarily focusing on:
- Whether a partnership approach with another provider can provide a solution
 - Whether any further cost reductions are possible without compromising patient and staff safety
 - Whether we can agree a different contracting model with commissioners that reflects the packages of care each commissioner requires. Several commissioners have indicated a willingness to increase prices by up to 15%, however, by itself, this will not be sufficient to close the financial gap.

6. Timeline

- 6.1 The Trust's Board requires an indication of the direction of travel at its meeting in December and to receive final recommendations by the end of January 2018. Key points in the timeline are:
- Communication and engagement with internal and external stakeholders - ongoing
 - Review of the contracting strategy, working with all existing commissioners – by early December 2017
 - Exploration of partnership approaches with other service providers – by end of November 2017
 - Conclusion of review and report with recommendations to the Trust Board at its meeting on 25 January 2018.

7. Consultation

- 7.1 The Trust is mindful that it is the responsibility of commissioners (Local Authorities) to commission inpatient detoxification provision in line with NICE guidance.
- 7.2 The national picture of commissioned inpatient detoxification services is complex, with a myriad of services available ranging from detox in a hostel setting to clinically assisted inpatient care within an acute healthcare or psychiatric setting. In Nottingham, patients benefit from specialist inpatient detoxification services at The Woodlands.
- 7.3 The Trust has communicated its intention to review whether we can continue to provide The Woodlands inpatient services and we are committed to being transparent about our review and its conclusions.
- 7.4 At this stage, our consultation as such is about ensuring key stakeholders are aware of the review and are able to offer input.
- 7.5 We have mapped the key stakeholders – see Appendix B.
- 7.6 The Trust is engaging with Nottingham City commissioners (and others) about the Woodlands review.

8. Conclusion

- 8.1 The Trust is committed to providing high quality care to the local population wherever that is clinically and financially viable. The services at the Woodlands unit provide specialist inpatient care to a very vulnerable group of patients. However, the current model is not affordable and the Trust is not able to continue to bear the financial loss of the service as this means resources have to be redirected from other services.
- 8.2 The Trust Board has indicated it will need to pull out of providing inpatient detoxification services and close The Woodlands Unit unless a solution can be found.

8.3 The Trust has commenced a review and is working closely with commissioners, staff and other stakeholders.

8.4 The Committee is asked to:

- NOTE this report
- ADVISE how it wishes to be involved and what issues it wishes to raise through the review.

About the Woodlands Unit

1. The Woodlands Unit is on the Trust's Highbury Hospital site in Nottingham. It provides short stay detoxification inpatient services for people with drug or alcohol dependence. It has 15 beds and provides care and treatment to adult service users whose withdrawal symptoms are so severe they require 24-hour inpatient care.
2. The service offers highly specialised interventions and is the only specialist inpatient detoxification unit within the East Midlands that is compliant with the National Drug Treatment Monitoring System (NDTMS).
3. Inpatient care is part of an integrated treatment pathway and the The Unit offers expert, highly skilled and evidence based interventions to respond to a complex range of needs.
4. We expect to see service users who present with chaotic patterns of poly drug misuse which may well include alcohol. Admission to The Woodlands should never be regarded as the first treatment option to pursue. Specialist residential inpatient treatment is primarily reserved for the following groups:
 - Service users who require detoxification prior to moving on to residential rehabilitation
 - Service users with a high level of complex needs who have had several changes to their community care plan over a period of time in an attempt to initiate significant lifestyle change which will ultimately stabilise their drug or alcohol consumption, and which have proven unsuccessful
 - Service users who are regarded as vulnerable in cases of domestic violence and abuse
 - Pregnant women
5. Complex needs may include resistive and persistent illicit drug use which has not responded to comprehensive community intervention, risk of significant physical health problems, risk of mental health deterioration or high level mental health needs.
6. The Unit is currently experiencing high numbers of patients with chronic physical healthcare issues associated with their drug or alcohol use and typically a co-morbidity of increasing age and long term conditions.

Aims of the service

7. The key aim of The Woodlands Unit is to support service users in becoming abstinent from drugs or alcohol as part of their recovery journey. Working with community substance misuse services and other involved support networks we ensure that the timing and availability of detoxification meet an individual's overarching recovery plan.

Lengths of stay

8. All patients at The Woodlands undergo a pre-admission assessment with a member of The Woodlands nursing team. This assessment generates a care plan that is bespoke to that individual, their aims and objectives. The length of stay is often dictated by what the patient wishes to achieve. Planned treatment lengths and interventions range from 3 days to 3 weeks, however the average length of stay is 10 days. The Woodlands has however worked with individuals whose needs are so complex it has been necessary for an admission stay of over a year, however this is very much a rarity.

Staffing

9. The Woodlands provides care to service users whose withdrawal symptoms require 24-hour inpatient care. We offer access to 24-hour medical cover overseen by a Consultant Addiction Psychiatrist, who facilitates individualised care reviews, working with service users on managing their care. All admissions are facilitated by a non-medical prescriber with extensive knowledge and experience in substance misuse services and treatment options. This is a highly effective model of care with all service users engaging with their admission process and treatment plan almost immediately upon arrival. This model facilitates a flexible service meeting need to match existing recovery plans.
10. Day to day care is provided by an experienced multi-disciplinary team inclusive of mental health and physical health nurses, occupational therapists, physiotherapists and healthcare assistants. The team brings added value with experienced leads in tissue viability, sexual health, safeguarding and domestic violence, blood borne viruses, post-traumatic stress disorder and veterans support, all of which address the complex needs of this service user group.
11. Our staffing is structured around a skill based model, with all staff having appropriate qualifications and training for their designated role.

Aims of the service and its effectiveness

12. Below are the aims and objectives set out by the Nottingham City Commissioners (the Crime and Drug Partnership) within The Woodlands Service Specification:
 - Safe detoxification from primary substance of misuse.
 - Abstinence from primary and secondary substances of misuse.
 - Stabilisation on substitute medicines.
 - An improvement in physical health and social well-being.
 - Improved social functioning.
 - An increased insight and awareness of personal recovery goals.
 - A reduction in risk behaviour associated with intoxication.
 - A reduction to the risk of overdose.
13. Overall, The Woodlands achieves all its performance indicators set out by Nottingham City commissioners. For example:

- In the last 12 months, the percentage of those admitted for assisted withdrawal and/or stabilisation that successfully completed treatment was 96%
- 100% of service users in the last 12 months have reported they felt safe at The Woodlands
- 97% of service user feedback rates The Woodlands' physical environment as "Excellent".
- 100% of service users report an increased quality of life and gains in recovery at both the point of discharge and 3 months post discharge from The Woodlands.

List of Key Stakeholders

The Woodlands – Stakeholder List

Stakeholder
Internal
Staff
Trust Board of Directors
Trust Council of Governors
External
Patients
Public
Commissioners, including Nottingham Crime & Drug Partnership
Nottingham City Health Scrutiny Committee
Other providers