

Report to Health Scrutiny Committee – 22nd March 2018

Title of paper: Inpatient Drug and Alcohol Detoxification Services

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Summary:

This paper follows papers presented to Health Scrutiny in November 2017 and January 2018 regarding drug and alcohol inpatient detox services (The Woodlands) currently provided by Nottinghamshire Healthcare Foundation Trust (NHFT).

Nottinghamshire Healthcare Foundation Trust (provider of The Woodlands) has confirmed the closure of The Woodlands.

This paper provides a summary of the proposal for securing future access to drug and alcohol inpatient detoxification for Nottingham City residents.

1. ENGAGEMENT AND CONSULTATION

Other commissioners across the region who currently utilise The Woodlands have been contacted by commissioners to understand their intentions going forward. While there was some interest in potential for procurement at a regional level, the other key regional commissioners took the decision to tender at a local level within a short timescale.

A market scoping exercise has identified a limited market of existing alternative provision. Independent providers now deliver nearly all inpatient units that were identified nationally¹. There is very limited provision across our nearest geographical neighbours.

Commissioners are undertaking service user engagement to inform the ongoing appraisal of alternative options. The first session was held 23rd January 2018. Service users were provided with an update on the position regarding The Woodlands at that time. Service users were asked to feedback on the needs of specific equality groups where possible, and their priorities for inpatient provision. 7 service users (3 identifying as carers also) engaged in the engagement work and were either previous users of The Woodlands, or potential future users of inpatient detox. NHFT was also represented at the focus group and the views from the focus group were presented to the NHFT Board where the decision on the closure of The Woodlands was made. Discussion also took place at existing service user forums including The Alcohol Panel (19/01/2018).

Key themes that emerged from engagement:

- Not everyone is able to complete a community detox and having access to inpatient detox is important. It also provides a safety net for service users in times of crisis.

¹ Recent CQC briefing raising concerns about the safety of detox provision at independent drug and alcohol providers: <http://www.cqc.org.uk/news/releases/serious-concerns-uncovered-residential-detox-clinics-regulator-demands-improvements>

- Having local access to drug and alcohol inpatient is important to support service users to engage. However, some felt that service users could travel to out of area inpatient facilities.
- Timely access to drug and alcohol inpatient provision is important, including for crisis/urgent access.
- Seamless transition from inpatient services to community treatment is important to support long-term recovery from substance misuse.
- Access to inpatient services directly from hospital including the Emergency Department would be beneficial to ensure service users have access to appropriate interventions and reduce inappropriate hospital admissions.
- The building and environment are important, including ensuring it is a safe environment and able to safeguard service users who may be vulnerable.
- Inpatient services need to be able to provide effective treatment that takes account of physical and mental health comorbidity. This might be particularly important for older substance users who may be more likely to have physical health complications on top of substance misuse.
- Having staff who are supportive and empathic is important.
- Inpatient services should have separate male and female accommodation.
- No-one present at the engagement session was from a Black or Minority Ethnic community. Further work is required to engage with users from Black and Minority Ethnic communities to understand their needs in relation to inpatient provision.
- Market research highlighted that the potential provider market for inpatient detox services nationally is small.

A second focus group is scheduled for 26th March 2018. This focus group will inform service users, carers, and family on the proposal for access to alternative drug and alcohol inpatient detox provision. There will be opportunity for service users, carers and family to put forward their views on priorities for the alternative provision identified in 2.1. Additional attempts will be made to engage users from Black and Minority Ethnic communities in this session.

2. EQUALITY

An Equality Impact Assessment (EIA) has been completed.

The EIA has highlighted that:

- 74% of those accessing The Woodlands are male. Separate male and female accommodation is required and alternative provision must have an appropriate balance of male/female accommodation.
- Nottingham has an ageing cohort of opiate users. Drug Misuse & Dependence: Guidelines for Clinical Management 2017 (Department of Health) recommend a lower threshold for inpatient access for older drug users due to the increased risk of drug related death.
- Alternative provision needs to be of a sufficient standard and quality to respond to physical comorbidity of older opiate users.
- Vulnerable adults may find community detox more difficult. There is a need to consider how vulnerable adults will access inpatient services, particularly if they were to be out of area.
- It is important to ensure ongoing demographic monitoring of access to inpatient provision to assess whether it is meeting identified local need.

3. **ALTERNATIVE PROVISION**

2.1 Commissioners considered alternative options based on the closure of The Woodlands:

- No access to inpatient detox for Nottingham residents
- Procurement of a new inpatient detox service
- Spot purchase of bed days from out of area provision
- Secure alternative local provision

2.2 **Edwin House**

Framework is the lead provider of drug and alcohol treatment in Nottingham City, and are committed to providing excellent services to vulnerable residents.

Framework have recently undertaken a wholesale refurbishment of a building in Radford which had previously operated as an elder persons care home. Edwin House, located at 56/57 Millers Court Radford is a 63 bedded Care Quality Commission (CQC) registered care and reablement centre for adults experiencing significant physical, emotional or mental health issues related to long-term problematic substance misuse. Edwin House has been developed to include a dedicated 15 bed drug and alcohol inpatient detoxification unit.

Framework have successfully secured a 3+1+1 year contract to deliver drug and alcohol inpatient detoxification services for Leicester, Leicestershire and Rutland (LLR) from the Edwin House unit. The new LLR contract is due to be operational on 1 June 2018.

As part of the new contract to deliver Leicestershire services Framework are extending the current Nottingham Recovery Network subcontract with Nottinghamshire NHS Foundation Trust to provide clinical services in to Edwin House Detoxification Unit. The clinical input from Nottinghamshire Healthcare Foundation Trust will include Consultant psychiatrist input, Non-medical prescriber, on-call medical cover, pharmacy services including all medications and weekly pharmacist visits. Framework directly employs all nursing staff.

Edwin House will have the same staffing ratios and the current provision in terms of Clinical and support staff. This includes Nurses, Consultant Psychiatrist, Junior Doctors and Non-medical Prescribers, however unlike the current provision Edwin House will in addition have both Registered Mental Health Nurses (RMN) and Registered General Nurses (RGN) Nurses as well as a full time Occupational Therapist.

Many of the Edwin House staff have recently joined the team from the Woodlands including the overarching Clinical lead, the Assistant Manager, a Non-medical prescriber and a number of Nurses.

Edwin House will offer medically assisted detoxification/stabilisation programmes tailored to individual need. As part of Nottingham Recovery Network the service will enable improved working with community teams to ensure that the timing and availability of detoxification is consistent with individuals overarching Recovery Plans.

Edwin House's purpose-designed environment will allow it to meet the full range of presenting detoxification requirements including but not limited to:

- Alcohol
- Opiates, Opioids
- Stimulants
- Novel Psychoactive substances
- Ketamine, GHB
- Over-the-counter and prescriptions-only medications

- Poly-substance use

All interventions will be delivered in line with national guidance (e.g. NICE) and the service will be inspected on a regular basis by the CQC to ensure the service delivered is Safe, Effective, Caring, Responsive and Well Led.

Edwin House has a full suite of clinical policies, procedures and protocols to ensure patient presentations are managed to CQC regulations; NICE inpatient guidance, Drug Misuse and dependence; UK guidelines on Clinical Management 2017 and nationally recognised best practice. The Edwin House pharmacological model is informed by the national recovery agenda and prescribing interventions reference the “Routes to Recovery Mapping Manual” (PHE 2013) and the “Medications in Recovery” (NTA/Strang 2012).

Edwin House will provide 24-hour medical care, overseen by a highly experienced Addiction Consultant Psychiatrist. Day to day treatment will be provided by an experienced multi-disciplinary team including Doctors, Nurses, Occupational Therapist, Social Work and Support Workers. This approach brings added value with staff holding a range of specialist interests e.g. tissue viability, sexual health, harm reduction, safeguarding, and domestic violence.

In addition to clinical interventions Edwin House will provide an evidenced based structured programme. The programme will be informed by assessed need, the Recovering Planning process and service user feedback. It will include but will not be limited to:

- Structured group work (including anxiety management, relapse prevention, life coaching, relationship awareness)
- 1:1 Sessions (including debt management & advice, domestic abuse counselling, housing advice, return to work)
- Mutual aid groups (including AA/NA, LGBT, Women’s Aid, Smart Recovery,)
- Complementary therapies (including auricular acupuncture, massage, relaxation techniques, mindfulness)
- Healthy lifestyle interventions (including on-site gym, healthy eating advice, specialist advice re: health conditions and nutrition)
- Harm minimisation interventions (including educational sessions, overdose response training, take home naloxone)
- Peer Mentoring .
- Art, music, poetry therapy
- Access to the on-site gymnasium at Edwin House with qualified health instructors

2.3 Proposal

Based on the options appraisal, consultation findings, Equality Impact Assessment, and market research, it is proposed that Nottingham City Council utilise Edwin House for drug and alcohol inpatient services for the 10 month period 31st May 2018 to 31st March 2019.

This will be secured through the appropriate contracting arrangement as advised by Legal.

This will deliver a strategic saving of circa £99,000 for the period. Framework are able to offer a service which meets all national and local requirements at a reduced rate due to their, independent nature, streamlined corporate and centralised costs and ability to procure best value from goods and services.

Based on procurement regulations it is necessary to undertake a competitive tender for drug and alcohol inpatient services from 1st April 2019. A procurement exercise will be undertaken in 2018/19.

4. TRANSITION

Inpatient detox is a short intervention: service users only remain within The Woodlands for an average stay of 9-10 days. Therefore, it should be possible to manage transition to any new provision without having to transfer patients during their inpatient detox stay. This will minimise risks to service users.

Commissioners are working with NHFT to finalise a contract extension to the existing Woodlands service to 31st May 2018. This will allow additional time to transition to Edwin House minimising the risk of a gap in access to inpatient detox.

NHFT is undertaking a clinical review of provision at The Woodlands on a weekly basis to safely manage service users' treatment while the service prepares to close. NHFT will provide weekly updates to commissioners on their capacity to safely deliver services to Nottingham City residents during the extension period. The Woodlands will stop providing services to Hull from 31st March 2018, which will help to manage capacity within the service for the remaining contracts.

Edwin House is due to start delivering the LLR inpatient detoxification contract from 1st June 2018. A full transition plan is currently being negotiated with NHFT, whom remain confident that they can continue delivering until 31st May 2018.

5. NEXT STEPS

- To confirm with Legal the appropriate contracting mechanism for use of Edwin House for 10 months
- To secure appropriate approvals to implement contracting mechanism as required
- To undertake second service user and carer engagement session
- To confirm requirements of service through service specification and any contract variations required
- To confirm implementation/transition plan
- Ongoing and regular monitoring of provision at The Woodlands during the transition period to ensure patient safety
- To undertake tender exercise for inpatient detoxification service ready for service commencing 1st April 2019