

## Report for the Oxfordshire Joint Health Overview and Scrutiny Committee (HOSC)

<b>Date of Meeting:</b> 11 <sup>th</sup> March 2010	<b>Paper No:</b>
---	------------------

<b>Title of Report:</b> Oxfordshire Drug Recovery Project (DRP).
--

<b>Purpose of Report:</b> To present the committee with the facts regarding the closure of the Drug Recovery Project (DRP) and delays in the opening of a new residential detoxification facility.
---

<b>Background:</b> <b>Who are Oxfordshire DAAT:</b> Oxfordshire DAAT is the partnership commissioner of drug and alcohol treatment services and drug and alcohol criminal justice treatment interventions, hosted by Oxfordshire PCT. We are governed by a specialist authority the National Treatment Agency (NTA), which is an arm of the Department of Health. Our budget is made up of Department of Health finance through the NTA and Home Office funding for criminal justice interventions. We are currently ranked fifth in the country for both treatment effectiveness and the number of drug users in treatment against the prevalence of drug use in Oxfordshire. We are the best performing DAAT in the South East. <b>The Drug Recovery Project:</b> Was originally an Oxford City supported housing project which subsequently became an Oxfordshire based initiative aimed at providing individuals who were on Opiate Substitution Therapy with the opportunity of detoxification in a local residential setting over a period of up to six months. The project's main funders were the County Council (Supporting People) with some grant funding from the City Council, with the DAAT providing the funding for the drug treatment elements of the project.
--

<b>Actions taken by DAAT and reasons:</b> Due to Supporting People cost pressures and funding formulas, reductions of 50% (30% in the first year) were required, as Supporting People were the main funders of the project this would have a significant impact. The City Council cost pressures meant that they were unlikely to sustain their grant to the project. As a temporary measure the DAAT agreed to fund some of the deficit whilst joint commissioning arrangements could be made. All contracts and the lease on the building had expired, however the DAAT worked with Supporting People and the City Council to commit to the development of a new project due to the cost effectiveness of the model, although significant clinical governance concerns had to be addressed for a new service to be effective and as such the new specification was treatment and not housing focussed. The new specification requested a 5–8 bed project as a rise in the number of beds would increase cost effectiveness. At the time of going out to tender, it was assumed that the premises in Walton Street, even though it was only five beds, would be available for the provision to act as a buffer until alternative premises were identified through the tender process. It was anticipated that there would be a three- six month delay in the new project opening to allow for refurbishment of premises to meet new regulations and for the appointment of clinical staff. Due to the condition of Walton Street, closure would need to occur for refurbishment of the existing premises regardless of the
---

tender, therefore to ensure patient safety and continuity of care for existing clients ECHG were requested not to admit any new clients as closure for refurbishment would mean a disruption in their detoxification.

Midway through the tender process (after the Pre-Qualification Questionnaire stage) the DAAT received a copy of a letter sent to Judith Taylor (ECHG) from Graham Stratford (Oxford City Council). This letter stated that as the tender specification was for 8 beds the property was no longer suitable for the project and as such the City Council would regain possession of the property. Mr Stratford was contacted immediately by e mail to clarify that the specification was for 5-8 beds and the DAAT requested confirmation that the property would be available. We were informed that the property was no longer available and would be returned to housing stock. The property was subsequently sold. The tender process continued with Supporting People and the DAAT.

The tender was awarded to SMART who had identified a partnership with Dominion Housing for the provision of premises. Unfortunately attempts at securing accommodation failed and due to the economic downturn Dominion Housing felt they could not continue with the partnership as they wanted to consolidate their core business.

SMART then explored a partnership with the Ley Community to lease a property on their site. During this process the DAAT secured £150,000 capital grant from the Department of Health (NTA) to refurbish any premises. Negotiations broke down due to the length of term of the lease. The Ley Community requested an initial one year lease with a three month notice period, it was felt that £150,000 capital investment could not be made on a one year lease and a three month notice period was too short for a programme length of up to six months as clients would be left vulnerable.

### **Current Situation**

SMART have formed a partnership with St Mungo's a housing provider currently providing two supported housing projects for drug and alcohol users in Oxford. The partnership will see SMART providing the psychosocial treatment services and management, with St Mungo's providing the premises, resettlement, housing management. Premises on the Iffley Road in Oxford are in the process of being secured and work on refurbishment is anticipated to commence by the end of March 2010. All parties will be working closely with the city council to facilitate any planning requirements.

SMART and St Mungo's are currently drawing up a full project management plan for the refurbishment of the premises and the Care Quality Commission registration.

There has always been adequate funding for the medical input into this project, which could not be sourced until premises were secured.

### **Where any users disadvantaged?**

Oxfordshire User Team (OUT) is an independent charity which represents drug and alcohol users. Amongst their services, they offer independent advocacy for service users requiring treatment or in treatment. There have been no advocacy cases for any clients who feel their drug treatment has been compromised as a result of this service closure. There is no evidence at all that any individual's treatment for drug addiction has been impacted in any way. Oxfordshire's drug treatment system is one of the best in the country.

Oxfordshire DAAT made available an additional £40,000.00 for residential detoxification to ensure that additional placements could be made during the period of closure. There was no increase in placements. Due to the County Council cutting their contribution to the residential rehabilitation budget some of this money was required to offset these cuts, in order to sustain the partnership investment in residential placements.

The national figures of those individuals in treatment in Oxfordshire over the last three years is:-

<b>2006/2007</b>	<b>2007/2008</b>	<b>2008/2009</b>
<b>1937 individual people</b>	<b>2213 individual people</b>	<b>2271 individual people</b>

The number of individuals treated within the DRP was on average 20 per year. In the entire life of the project only 89 people completed their treatment:

<b>DRP</b>	<b>Up to 31 March 2005</b>	<b>2005-6</b>	<b>2006-7</b>	<b>2007-8</b>	<b>Total over the entire life of the project</b>
Starts	90	20	24	6	140
Left	84	21	20	11	136
Left Planned	58	13	11	7	<b>89</b>
Left Unplanned	26	8	9	4	47

Community detoxification is available to every drug user. However, we have continued to seek premises and work with supporting people in developing this provision to maximise opportunities in a cost effective manner for individuals on Opiate Substitution Therapy to become drug free. It is essential that the model is treatment focussed and not housing focussed to maximise the clients opportunity to achieve abstinence.

### **Service User Involvement?**

As Commissioners of one of the best treatment systems in the country for many years we have led the field in service user consultation. Every year we have a robust process of consultations with current, past and potential service users, with Oxfordshire User team conducting over 300 one to one interviews to ascertain individual's views and opinions of treatment and treatment accessibility. We have service user representation on every level of commissioning including the Board. Service users are an integral part of every recruitment and tender process, the most recent being the joint Oxfordshire County Council/DAAT residential detoxification and/or rehabilitation framework tender. Service users have worked alongside commissioners to undertake site visits and interviews at establishments across the county.

OUT have stated that although they welcome the new treatment project to broaden the opportunities for detoxification no service user in Oxfordshire has been disadvantaged by this process.

### **Recommendation**

That the Health Overview Scrutiny Committee support the partnership in taking forward this initiative and notes the measures taken to avoid any patients being disadvantaged.

**Report Author: Jo Melling**