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Decision No.....

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**By:** Colin Thompson  
**To:** West Kent Health and Wellbeing Board, January 21<sup>st</sup>, 2014  
**Subject:** West Kent Adult Integrated Substance Misuse Service  
**Classification:** Unrestricted

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## 1. Purpose

1.1 To inform the Health and Wellbeing Board of an overview of the West Kent Adult Integrated Substance Misuse Service that has been commissioned by Kent County Council.

## 2. Overview

2.1 The Kent Drug and Alcohol Action Team (KDAAT) Partnership undertook a competitive tendering exercise in 2011 for a prime provider of substance misuse (drugs and alcohol) services in the districts of Dartford, Gravesham, Maidstone, Sevenoaks, Tonbridge and Malling and Tunbridge Wells (West Kent). The contract was awarded to CRI and following a 3 month transition period the service commenced on 1st April 2012.

2.2 CRI have been commissioned to deliver a range of interventions in order to prevent problematic substance misuse, reduce substance misuse related crime and enable the long-term recovery, rehabilitation and social re-integration of people in Kent affected by substance misuse including:

- Assertive outreach
- Brief Advice and Information
- Harm Minimisation Interventions (e.g. BBV testing and vaccinations)

- Needle and Syringe Programmes
- Pharmacological Interventions
- Structured Psycho-social Interventions
- Intensive Key working
- Structured Group Work Programmes
- Community Detoxification
- Access to in-patient stabilisation and detoxification
- Access to residential rehabilitation
- Criminal Justice Interventions (Arrest Referral Scheme, Alcohol Treatment Requirements, Drug Rehabilitation Requirements, Alcohol and Cannabis Diversion Scheme)
- Tailored interventions to improved social functioning and enhance life skills
- Family focused interventions (including support to carers/significant others)
- Initiatives to promote general physical improvement

2.3 CRI have secured hubs in Maidstone, Gravesend and Tonbridge to deliver their services from.

### **3. CRI model of service delivery**

3.1 CRI work in partnership with Sussex Partnership NHS Foundation Trust (SPFT) and the Royal Society for the encouragement of Arts, Manufactures and Commerce (RSA).

3.2 The programme is underpinned by a whole person recovery approach. This is one of the RSA's flagship programmes which was developed as a result of the 2009-11 project in West Sussex. The system is a high level commissioning framework for those seeking to move towards recovery focused services supported by vibrant recovery communities. It includes the provision of an everyday activities programme, public events programme, volunteer scheme, and small sparks scheme. Central to CRI's model is the support of a dedicated Recovery Worker, case managing the entire recovery journey. They will work as a multi-skilled member of a multi-disciplinary team, thereby eroding traditional role-silos to deliver a holistic, needs-led service in line with CRI's 'Foundations of Recovery Programme'.

3.3 CRI's Peer Mentoring programmes is an essential component of the model.

3.4 The duration of the contract is two years, with the option to extend for a further two years (subject to satisfactory performance).

#### **4. Payment by results**

4.1 The service is part of the National Payment by Results (PbR) Pilot. The model allows for independent assessment of need and assignment of a tariff which uses financial incentives to reward the prime provider for:

- improving outcomes for individuals and families with substance misuse problems especially those with most complex needs (in terms of freedom from dependency, offending, health and wellbeing), and
- reducing need and demand for public services amongst people who have had substance misuse problems.

The assessment and payment framework promotes a holistic approach to recovery in line with the aims of the National Drug Strategy. The provider will only receive PbR payments when they can demonstrate progress against on the full range of client needs that contribute to the wider impact of substance misuse.

4.2 The LASARS is a new service that was formed from the existing care management team and operates independently of the provider in West Kent. The LASAR service is responsible for the assessment of stock and flow clients and the assignment of a band in line with the Kent PbR tariff model. The LASARS conduct a comprehensive assessment of the individual's needs. Following the assessment, individuals are categorised into one of the following bands:

- Critical
- Substantial
- Moderate
- Low
- No need for structured treatment.

4.3 Service users are assigned an overall band according to the highest level of need identified in the two domains. This will ensure that the overall band is a holistic view of the client's need and complexity.

4.4 The Reduction in Offending Payments is based on "the Home Office Model" which calculates the average number of offences committed by a cohort of individuals recorded as being in structured treatment and provides an estimate of the cost to the community of those offences. From this information it will be possible to estimate the savings to the community ("Estimated Community Savings") as a result of successful treatment:

- 53% of the £200k offending pot will be paid if baseline performance is equalled
- The full £200k will be paid if a 4.3% reduction in offending is achieved
- The price per offence saved will be set at £3.9k ('economic' pricing)

4.5 The Kent PbR model incentivises the provider to help individuals achieve and sustain recovery in the long term. Tariffs reflect case complexity and level of need so that sustained recovery of clients with critical needs attract a higher payment for the provider than those with low or moderate needs. The model also allows the provider to have the freedom and flexibility to innovate, pioneer new interventions and do what is

needed to promote recovery and support people to sustain freedom from dependency on drugs or alcohol rather than delivering a standard service focused on clinical treatment.

4.6 An annual contract value of £4m has been made available for the West Kent substance misuse service. Payments are split between up-front funding (core activity) and PbR payments with PbR payments accounting for an increasing share of the total over the life of the contract.

## **5. Recommendations:**

5.1 Members of the Health and Wellbeing Board are asked to note the report.

## **6. Contact details**

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