Commissioning the Community Alcohol Service in County Durham

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Strategic Alcohol Commissioning Manager
County Durham DAAT
Regional Drivers

• Regional Statement of Priorities - Prevention, Treatment and Control.
• Balance – Regional Office for Alcohol.
• Alcohol Commissioning lead within the DAAT with dedicated resources.
• 5 x Local Action Plans now merged into one County Durham Strategy.
• PCT – top 10 priority, with an identified Alcohol Policy Lead.
• LAA Target – Alcohol Harm Related Hospital Admission Rates.
Delivery of service

- Population of approx 500,000
- Large Rural Areas
- Areas of deep deprivation
- Described by ANARP (2005) as worst in the UK for access to alcohol treatment services ratio 1:102 compared with North West 1:12
Where do I start.....

- Tasked to design and implement a County wide service within 12 months.(2007)
- Holistic approach – Prevention, Treatment, Control.
- Informed by Easington pilot & Darlington Screening Tool Trials.(2006)
- Integrated model – partnership approach including Voluntary sector & Statutory sector.
- Emphasis on Brief Intervention Screening Tool – AUDIT.
- Train all frontline staff – not just healthcare.
- To implement an equal service across County Durham then focus on equity!
- Redesigned services with existing providers where possible.
- Maintain the links between existing Drugs services and the new alcohol service.
1. Locally lead the NHS
2. Work with community partners
3. Engage with public and patients
4. Collaborate with clinicians
5. Manage knowledge and assess needs
6. Prioritise investment
7. Stimulate the market
8. Promote improvement and innovation
9. Secure procurement skills
10. Manage the local health system
11. Make sound financial investments

….don’t forget

World Class Commissioning

Passionate about health
Service User Consultation

- Understanding the agenda and need.
- Met with various service users to understand their stories.
- Designed the model and pathways.
- Met with service users to process map their journey through the treatment system.
- Regular ‘touch base’ and user satisfaction cards to ask for feedback.
- Do not be afraid to reflect, amend or ditch something that’s not working!
Treatment Tiers

Training Workshops

Audit C
Screening Tool

Questions 1 - 3

Score 0 - 4
No Action

Score 5+
Full Audit (Q 4 – 10)

Score 0 - 7
No Action

Tier 1
- Criminal Justice
- A&E
- Public Health
- Primary Care

Tier 2
- Score 8 – 15
Simple Structured Advice (5mins)

- Score 16 - 19
Extended Brief Intervention (11-20 mins)

- Score 20+
Treatment Intervention

- Tier 4
Inpatient Treatment / rehab

Risks to Health
Advice, leaflets, signposting, etc

How to make changes

Integrated Community Alcohol Service
Community Detoxification, Group work, ongoing support and after care (for referral see Form 1a)

Tier 3

Tier 4
Core Team

Service Manager
Administrators
2 x trainers
Early Intervention worker
Family Link worker
Aftercare & Support workers
Hospital Liaison Nurses
Locality Leads
Nurses
Counsellors
Social Worker
Criminal Justice Staff
Sessions of Consultant time
Service Delivery

Brief interventions delivered by **ALL** front line staff – AUDIT C

Score 20+ refer into Alcohol service (CAS)

Core Staff/ Referral point
Office base - Durham City

Locality lead will manage area / referrals.
Clients will be seen in community venues where possible.
i.e. GP surgeries, Health centres, sure start buildings etc,

**Durham/CLS/ Derwentside**
Clinical staff
Based in substance misuse treatment centre

**Easington/Sedge**
Clinical staff
Based in substance misuse treatment centre

**Dales / Darlington**
Additional staff member to existing alcohol treatment team
Phase 1 – 2006-7 (£349k)

Service manager
B8

Admin B4

1 x Primary Care Liaison Officer-(PCT) AD B6
1 X Primary Care Liaison Officer- (NECA) Ros

Early Intervention Team

Early Intervention Officer KR B7
1 x family support -FC
1 x family support (NECA)
1 x family link - Sheena
1 x family link (DISC)

North PDA

PDA Lead B7
Locality Officer B 6
Alcohol Support Clinical Interventions B5
Admin 0.5 B4
Admin 1wte B3
Derwentside
Durham/CLS

East PDA

PDA Lead B7
Locality Officer B6
Alcohol Support Clinical Interventions B5 (SC)
Admin 1wte B3

South PDA

Locality Officer B6
Alcohol Support Clinical Interventions B5
Admin 1wte B3

Probation Rolling Programme

1 Programme manager SN
1 x key worker – Ian (NECA)
1 x key worker- Tracey (NOMS 6 months)
Admin 1 wte B3

Easington
Sedgefield

Team Title

Green = 06/07 in post
Blue = 07/08 in process
Red = 08/09 needs VCR

Simon
2 x aftercare/support (NECA)
J/P
Green = 06/07  in post
Blue = 07/08 in process
Red = 08/09 needs VCR

1 x Hospital Liaison B6
1 x aftercare/support (DISC) Simon
2 x aftercare/support (NECA) J/P

1 x Primary Care Liaison Officer-(PCT) AD B6
1 X Primary Care Liaison Officer- (NECA) Ros
Phase 2 – 2007-8 (£1.4m)

North PDA
- PDA Lead B7
- Locality Officer B6
- Alcohol Support Clinical Interventions B5
- 1 x Social worker DCC
- 1 x Hospital Liaison B6
- 1 x aftercare/support Simon

East PDA
- PDA Lead B7
- Locality Officer B6
- Alcohol Support Clinical Interventions B5
- 1 x Social worker DCC
- 1 x aftercare/support (DISC) – DAAT (Q4)

South PDA
- PDA Lead B7
- Locality Officer B6
- Alcohol Support Clinical Interventions B5
- 1 x Social worker DCC

Early Intervention Team
- Locality Officer B6
- Alcohol Support Wkr B4
- Alcohol Health Support Wkr B4

Admin B3

Early Intervention Officer KR B7

1 x family support
1 x family support (NECA)
1 x family link - Sheena
1 x family link

Early Intervention Officer (PCT) AD B6
1 x Primary care liaison officer (NECA) Ros

Admin B4

Admin 0.5 B3

1 x Primary Care Liaison Officer - (PCT) AD B6
1 X Primary care liaison officer (NECA) Ros

1 x Programme manager SN

1 x key worker – lan (NECA)
1 x key worker-Tracey (NOMS 6 months)

Admin 1 wte B3

Probation Rolling Programme

Admin 1 wte B3

1 x Social worker DCC

Green = 07/08 in post
Blue = 08/09 In process

0.6 B5
Alcohol Support officer – DAAT (Q4)
Phase 3 – 2009-10 (£2.1m)

Service manager

B8

North PDA

Derwentside

PDA Lead
B7

Locality Officer
B6

Alcohol Support Clinical Interventions B5

1 x Social worker
DCC

Admin 1wte
B3

1 x Hospital Liaison
B6

Green = 07/08 in post
Blue = 08/09 in process
Red = 09/10 to be VCR

Durham/CLS

PDA Lead
B7

Locality Officer
B6

Alcohol Support Clinical Interventions B5

1 x Social worker
DCC

Admin 1wte
B3

1 x Hospital Liaison
B6

East PDA

Easington

PDA Lead
B7

Locality Officer
B6

Alcohol Support Clinical Interventions B5

1 x Social worker
DCC

Admin 1wte
B3

1 x Hospital Liaison
B6

South PDA

Sedgefield

PDA Lead
B7

Locality Officer
B6

Alcohol Support Clinical Interventions B5

1 x Social worker
DCC

Admin 1wte
B3

1 x Hospital Liaison
B6

Early Intervention Team

Dales

PDA Lead
B7

Locality Officer
B6

Alcohol Support Clinical Interventions B5

1 x Social worker
DCC

Admin 1wte
B3

1 x Hospital Liaison
B6

Probation Rolling Programme

1 x Primary Care Liaison Officer (PCT) AD B6
1 x Primary Care Liaison (NECA)

1 x Family Therapist
B6

1 x Family Support
NECA

1 x Family Support
(DISCC)

1 x Family Support
NECA

1 x Family Support
NECA

1 x Social worker
DCC

1 x Hospital Liaison
B6

1 x Family Support
DCC

1 x Social worker
DCC

1 x aftercare/support
NECA J/P

1 x aftercare/support
(DISCC) Simon

Admin B4

Admin 0.5
B4

Admin Reception
B2

1 x Primary Care Liaison Officer (PCT) AD B6
1 x Primary Care Liaison (NECA)

1 x Hospital Liaison
B6

1 x Social worker
DCC

Admin 1wte
B3

1 x Social worker
DCC

Admin 1wte
B3

1 x Social worker
DCC

Admin 1wte
B3
Challenges

• 500 people on a waiting list since 2005.
• No existing services.
• Commissioning partners to recruit to deliver the model.
• Estate management – find buildings, etc
• Meet deadline for PCT provider/commissioning split
• Appointment of staff
  – Different organisational cultures
  – Integration of staff
  – Differences in salaries, terms and conditions etc
  – JD to prepare from scratch
  – HR processes – not appointing to key roles
• Hand over to manager & lead provider
Challenges/2

- Information sharing - IT systems not compatible
- Offering a seamless service to users.
- DES, LES and pharmacists

Communication
  - Championing the model
  - progress to a whole County... 98 GP practices, hospital staff, substance misuse staff, partner agencies, etc
.....challenges ahead!

- Designing and commissioning a new comprehensive service within a performance driven/market driven environment.
- Service is one year old – need to demonstrate value for money. (what are the social outcomes V investment?)
- Pressure on Service Management to recruit, implement and demonstrate effectiveness!
- To maintain the standard and the investment that has been set.
- Managing commissioning within an ever changing political environment….will public funding be available for alcohol and drug misuse in the future?
....don’t forget
World Class Commissioning

1. Locally lead the NHS
2. Work with community partners
3. Engage with public and patients
4. Collaborate with clinicians
5. Manage knowledge and assess needs
6. Prioritise investment
7. Stimulate the market
8. Promote improvement and innovation
9. Secure procurement skills
10. Manage the local health system
11. Make sound financial investments
2010..?
Or maybe not..