

Report

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Report to: Social Work Resources Committee

Date of Meeting: **7 February 2018**

Report by: Director, Health and Social Care

Executive Director (Finance and Corporate Resources)

Subject: Substance Misuse Services - Review of Funded

Establishment

1. Purpose of Report

1.1. The purpose of the report is to:-

- ◆ advise the Committee of a review of South Lanarkshire Council's Substance Misuse Services (SMS)
- seek approval to alter the establishment and staffing levels of the SMS within each locality of South Lanarkshire to better meet the needs of clients and their families

2. Recommendation(s)

- 2.1. The Committee is asked to approve the following recommendation(s):
 - that the developments to integrate South Lanarkshire's SMS and NHS Lanarkshire's Alcohol and Drug Service (LAaDs) and the integrated service to be known as the Community Addiction Recovery Service (CAReS) be noted;
 - that the staffing establishment to reflect the operational requirements for the CAReS across localities is realigned; and
 - that the changes to the Social Work Resources' establishment, as detailed in section 6.3, are implemented.

3. Background

- 3.1. The delivery of integrated alcohol and drug services has been deliberated upon nationally and locally since the inception of the Joint Future Agenda in 2002. There are many examples of integrated alcohol and drug services across Scotland. The proposed model for integration in South Lanarkshire includes co-location of teams within a defined locality and one Integrated Team Leader per locality who will manage across both Council and Health Services.
- 3.2. The Scottish Government, as part of its review of the national Drugs Strategy, has recommended the adoption of a "seek, treat and keep" approach to service delivery in order to promote recovery from addiction and reduce the number of alcohol and drug related deaths. This model will be facilitated by the introduction of a new national Drug and Alcohol Information System (DAISy) on 1 April 2018 which will require the entry of client identifiable information and follow the client through their treatment pathway.

3.3. In March 2017, it was agreed that the SMS provided by South Lanarkshire Council (SLC) and LAaDS would be managed by a joint funded integrated Substance Misuse Operations Manager. This post was subsequently appointed to on 1 September 2017.

4. Findings of the Review – Model of Service Delivery

- 4.1. The substance Misuse and Operations Manager undertook a review of the current delivery model and staffing arrangements for SMS and LAaDS. The review found that the current model of service delivery for clients affected by alcohol and drug problems in South Lanarkshire appears fragmented and does not always provide a holistic assessment of need, nor a clear treatment or care pathway for clients and their families to navigate through.
- 4.2. Clients are often assessed independently and/or referred between both services to achieve desired outcomes. LAaDS provide support with the physical and mental health components of care, psychiatric and physical health assessments and treatment, medical detoxification, stabilisation on methadone etc, while the social care elements of the care pathway are delivered by SMS, for example psychosocial interventions and income maximisation. This results in barriers to treatment engagement and retention, causing frustration for clients and their families as they try to navigate to the right service. It is also confusing for other agencies to determine which service their client should be referred to.
- 4.3. The benefits of integrating LAaDS and SMS will mean that holistic assessments of the clients' needs are undertaken and that health and social care interventions are delivered in an integrated way. This will ensure that treatment and care outcomes are maximised, for example enhancement of physical and mental health, income maximisation, improvement in community and family relationships, stable and safe housing options, reduction in criminal behaviour and increased opportunities for employment and training.
- 4.4. Integrating the LAaDS and SMS into one service the CAReS, will streamline referrals, reduce waiting times, reduce barriers to treatment and improve retention rates.
- 4.5. It also has the potential to reduce duplication and thus increase capacity within the service for more outreach work (for example home visits), addressing the 'seek' elements of the new national Drug Strategy. This additional capacity should also ensure that the public protection elements of care are enhanced. These are of vital importance as most clients and their families who access these services have the greatest level of vulnerability, live in our most deprived communities and yet are less likely than other care groups to access our health and social care services.

5. Current Funded Establishments

- 5.1. A benchmark exercise was undertaken against a similar service that has already established an integrated model of delivery. An analysis was also undertaken of the locality population profiles (ages 16-65 years), referral rates, and alcohol and drug related deaths by the Research and Information Officer within the South Lanarkshire's Alcohol and Drug Partnership in December 2017.
- 5.2. The review highlighted a number of issues within each locality with a disparity of staffing across the areas to meet the demographics and demands as well as inconsistencies in service delivery to meet demand. This reinforced the need to redesign the service.

6. Employee Implications

- 6.1. In order to address the locality based needs, it is recommended that the current staffing profiles are revised as identified at paragraph 6.3 Table 1.
- 6.2. The outcome of the review recommends removing two Full-time Equivalent (FTE) SMS Team Leader posts and creating two FTE CAReS Team Leader posts for Clydesdale and East Kilbride. These will be SLC (CAReS) Team Leader posts recruited to and employed by SLC for candidates with the skills and competence to work in an integrated team.
- 6.3. The table below identifies the establishment changes as a result of the service review and redesign for Council staff.

Table 1

Post (Social Work)	Current Number of Posts (FTE)	Proposed Number of Posts (FTE)	Grade	SCP Range	Hourly Rate	Annual Salary	Gross Cost inc on costs 30.3% (proposed posts)
Team Leader	2	2	Grade 3 Level 8	75-80	£19.64 - £21.16	£35,841 - £38,614	£93,402 - £100,628
Social Worker	5	7	Grade 3 Level 2 - 4	55–74	£14.60 - £19.35	£26,643 - £35,311	£243,010 - £322,071
Resource Worker	3	0	Grade 3 Level 2	55-65	£14.60- £16.94	£26,643- £30,914	£0
Substance Misuse Worker	9	10	Grade 2 Level 4	50-57	£13.58 - £15.04	£24,782- £27,447	£322,909 - £357,634
Social Work Assistants	6	5	Grade 2 Level 2- 3	36-48	£11.06 - £13.19	£20,183 - £24,070	£131,492 - £156,816
Total	25	24					£790,813 - £937,149

- 6.4. These posts have been evaluated using the Council job evaluation scheme.
- 6.5. Employees will be matched or redeployed to facilitate the structural changes identified and this will be undertaken in accordance with the Council's Collective Agreement and Matching Process.

7. Financial Implications

7.1. There are no financial implications for this redesign of the service as the changes in posts and moving to a locality model can be managed within the current budget allocation for the SMS.

8. Other Implications

- 8.1. A failure to redesign the current models of delivery may result in a failure of the service meetings its statutory requirements and national performance measures.
- 8.2. There is a statutory requirement that substance and alcohol services provided by Health and Council Services should be included in the Health and Social Care Partnership (HSCP).

9. Equality Impact Assessment and Consultation Arrangements

- 9.1. This report does not introduce a new policy function of strategy, nor does it recommend a change to existing policy, function or strategy, therefore, no impact assessment is required.
- 9.2. The trade unions have been consulted in relation to the review.

Val de Souza Director, Health and Social Care

Paul Manning Executive Director (Finance and Corporate Resources)

12 January 2018

Link(s) to Council Values/Ambitions/Objectives

- deliver better health and social care outcomes
- protect vulnerable children, young people and adults
- get it right for children and young people

Previous References

◆ Executive Committee report dated 08 March 2017: Health and Social Care Integration – Proposals for the Substance Misuse Services

List of Background Papers

♦ none

Contact for Further Information

If you would like to inspect the background papers or want further information, please contact:-

Liam Purdie, Head of Children and Justice Services and Chief Social Work Officer

Ext: 4887 (Phone: 01698 454887)

Email: liam.purdie@southlanarkshire.gcsx.gov.uk

Dr Val Tallon, Service Manager Ext: 3744 (Phone: 01698 453744)

Email: valerie.tallon@southlanarkshire.gcsx.gov.uk