

# ITEM 7 - LATE REPORT

## NORTH YORKSHIRE COUNTY COUNCIL

### CARE AND INDEPENDENCE OVERVIEW AND SCRUTINY COMMITTEE

1 OCTOBER 2015

#### North Yorkshire Horizons – Annual Update

#### **1.0 Purpose of Report**

- 1.1 Members are asked to note progress within North Yorkshire Horizons during year one of their contract with the Council

#### **2.0 Background**

The Service

- 2.1 The Council awarded contracts to DISC (Developing Initiatives Supporting Communities) and Lifeline in May 2014 for the provision of an integrated, adult substance misuse service for North Yorkshire. DISC was awarded the contract for the Treatment Service, and Lifeline was awarded the contract for the Recovery and Mentoring Service. DISC and Lifeline are required to implement an integrated service model across North Yorkshire, and the service specifications, including Outcomes and Performance Framework, are written to reflect integration requirements. DISC and Lifeline are jointly responsible for the delivery of a number of key performance indicators.
- 2.2 The brand 'North Yorkshire Horizons' was developed by DISC, Lifeline and service user representatives during the service mobilisation period, between June 2014 and the end of September 2014.
- 2.3 North Yorkshire Horizons opened on 1st October 2014. It is a specialist drug and alcohol service. Individuals who meet the following criteria are eligible for support from the service, in line with national guidelines:
1. Aged 18 years and over and,
  2. Misuse illicit drugs and/ or illicitly obtained prescription only medicines and/ or,
  3. Are assessed as a harmful or dependent drinker; we are currently prioritising dependent drinkers. This is assessed using a screening tool called 'AUDIT' (Alcohol Use Disorders Identification Test – see Appendix 1). An individual who scores 20 or more may be a dependent drinker, and they are likely to benefit from a full assessment and access to the range of treatment and recovery interventions on offer at North Yorkshire Horizons.
- 2.4 The Treatment Service also provides a substitute prescribing service to young people aged under 18 years old, when need is identified. Need for this service has historically been very rare in North Yorkshire. The Treatment Service

delivers this service in conjunction with psychosocial support provided by the young people's service 'Compass REACH'.

2.5 North Yorkshire Horizons delivers services from the following hubs:

- Harrogate - 7 North Park Road, Harrogate. HG1 5PD
- Northallerton - 5 The Applegarth, Northallerton, North Yorkshire, DL7 8LZ
- Scarborough - 56 - 60 Castle Road, Scarborough, YO11 1XE
- Selby - 74/76 Gowthorpe, Selby, YO8 4ET
- Skipton - Mill Bridge House, 4A Mill Bridge, Skipton, BD23 1NJ

2.6 North Yorkshire Horizons also supports 33 GP practices to deliver a drug treatment service from their practice, and over 20 pharmacies to deliver a needle exchange service. Some service users receive an opiate substitute medication (e.g. methadone) supervised consumption service from a pharmacy; the council contracts over 30 pharmacies to deliver this service.

2.7 In excess of 40 'Meet and Greet' and 'Recovery' groups are also on offer across North Yorkshire. Many of these are peer led, i.e. ran by individuals with experience of substance misuse, with support from North Yorkshire Horizons.

2.8 North Yorkshire Horizons is contactable via the Single Point of Contact (SPOC):

Telephone: 01723 330730. Email: [info@nyhorizons.org.uk](mailto:info@nyhorizons.org.uk)

2.9 The SPOC is available to anyone who needs to seek information, advice or guidance on adult substance misuse, or to make a referral.

2.10 Overall, North Yorkshire Horizons is commissioned to support as many people to recover from drugs and alcohol misuse and dependence as possible. This includes supporting those who wish to become abstinent to do so. Given the nature of drugs and alcohol dependence, Commissioners recognise the vital role of harm reduction within this vision. North Yorkshire Horizons is therefore commissioned to provide a range of harm reduction interventions, particularly during early engagement, and during any relapse – although harm reduction support is a key feature of Horizons' support package throughout.

### 3.0 Key Achievements

3.1 2618 service users have engaged with North Yorkshire Horizons since October 2014. The target for year one was 2300. The 2618 figure does not necessarily include all those who are accessing peer led community based recovery groups. There has consistently been 500-800 recorded attendances every month at community based recovery groups (note: recorded attendances, not individuals). Of the 2618:

- 943 are dependent on opiate drugs only
- 650 are dependent drinkers
- The remainder are engaging due to multiple substance misuse and/ or dependence

- 3.2 The SPOC consistently received over 1000 calls per week in the initial months of operation, and it continues to receive in excess of 6,000 calls per month. In excess of 300 calls per month are from professionals and/ or the public who need information, advice or guidance on substance misuse.
- 3.3 The number of community based 'Meet and Greet' and 'Recovery' groups in place across North Yorkshire has expanded to over 40. North Yorkshire Horizons inherited only a couple from previous service providers. Groups operate in all localities across North Yorkshire.
- 3.4 262 individuals have 'successfully completed treatment' between October 2014 and 30th June 2015, which means that they have mutually agreed with North Yorkshire Horizons that they have achieved their drug and/ or alcohol treatment goals and no longer require support from the North Yorkshire Horizons Treatment Service. North Yorkshire Horizons are commissioned to ensure that service users continue to be offered support from the North Yorkshire Horizons Recovery and Mentoring Service for up to 6 months after completion of treatment, in line with national guidance, and to improve their chances of remaining in recovery.
- 3.5 North Yorkshire Horizons has been working hard to identify premises in Ryedale from which to deliver a clinical treatment service (e.g. opiate substitute prescribing, blood borne virus testing and vaccinations). A range of other treatment services and recovery groups have been on offer in Ryedale since October, but a clinical treatment service started in Malton Hospital at the end of August 2015. This will promote access for service users in this locality.

#### **4.0 Case Studies**

##### ***Case Study One:***

XX entered treatment with Horizons in October 2014 via referral from GP. At the time of entering treatment XX was drinking up to 30 units of alcohol per day and classed himself as both physically and psychologically dependent.

XX stated on his original Recovery Plan that his long term goal was to become alcohol free and remain abstinent, but after numerous failed community detox's through his GP and the predecessor Community Addiction Team, didn't know how he was going to manage this.

It was agreed early on in XX's treatment plan between himself and his North Yorkshire Horizons Recovery Coordinator that some psychosocial work which included motivation to change and preparation for detox was needed prior to considering any pharmacological based detox with North Yorkshire Horizons. The Recovery Coordinator and XX worked together for a number of months to build 'Recovery Capital'. XX attended the Motivation to Change group and began attending local mutual aid (peer support) groups e.g. Smart Recovery, which helped him occupy his time positively and build relationships.

Over the following months XX continued to work closely with the Recovery Coordinator and compiled a plan to reduce his alcohol intake. This took him some time but he did eventually manage to reduce his alcohol usage. XX had also gained some structure to his daily life by attending groups and working on a 'weekly plan' with his Recovery Coordinator. It was obvious that this increased XX's confidence each time he achieved a goal set and both parties agreed that it was time to prepare for detox. We worked closely with XX, his family and his prescriber. XX's mother attended the sessions with him and a firm plan was put into place for the duration of the detox and for the time following on from this. XX was provided with a community alcohol detox from the North Yorkshire Horizons clinical team. The Recovery Coordinator visited XX and his mother at home where he was staying throughout the detox and for the first two weeks afterwards. A daily planner was completed to keep XX focused and daily monitoring was conducted for the first 7 days. XX managed his detox extremely well and withdrawal symptoms were minimal. On the 7th day XX was able to attend the North Yorkshire Horizons hub for his key work session. It was agreed that XX would be seen approximately twice a week to ensure continued support and to work on relapse prevention strategies. He was also seen by his prescriber for review.

XX has now been alcohol free for several weeks and with the exception of one lapse has done extremely well.

He feels he is now ready to get back into work and is actively looking for a job. He continues to receive weekly support from his keyworker.

It is soon hoped that XX's GP will take over in providing long term support as XX is well on track to achieving his alcohol treatment goals. He will also continue to receive support from the North Yorkshire Horizons Recovery and Mentoring Service for up to 6 months if he needs it.

XX's mother recently wrote a compliment to Horizons thanking them for all the support XX had received and for (in her words) 'giving her her son back'.

### **Case Study Two:**

A 75 year old female service user was referred to NYH by her GP, who informed us that the client suffers from Alzheimer's and Wernicke-Korsakoff syndrome, but had very little support in the community. A North Yorkshire Horizons Recovery and Mentoring Service worker (Jo) engaged with the client for a face to face triage as deemed most appropriate due to this service user's needs. Jo quickly realised that this individual was very vulnerable in her current situation as she was going out to the shops up to 4 times a day to buy alcohol after forgetting she had any in the house and had suffered numerous falls due to intoxication. During the triage, Jo gained consent to speak with her main family carer, her niece, and arranged to complete a three way meeting as soon as possible to gain a better understanding of her situation and support

needs. Due to concerns around her vulnerability following this meeting, Jo contacted NYCC customer service centre for advice regarding support available/ safeguarding concerns. She submitted a referral to the Adult Social Care Team at NYCC to ensure that the client received the appropriate amount of care due to her fluctuating capacity. The client was offered a comprehensive assessment by the North Yorkshire Horizons Treatment Service team but in the interim she was offered regular telephone support from Jo. Jo also referred her niece to Harrogate Carer's Resource to get the support she needs. Jo arranged and attended the comprehensive assessment with the lady to support and advocate for her, and to ensure that her colleague within the North Yorkshire Horizons Treatment Service gained a full understanding of her needs and the work that had been completed so far. This service user is now working with the Treatment Service team, and has a thorough network of professional support to complete a holistic approach to her recovery.

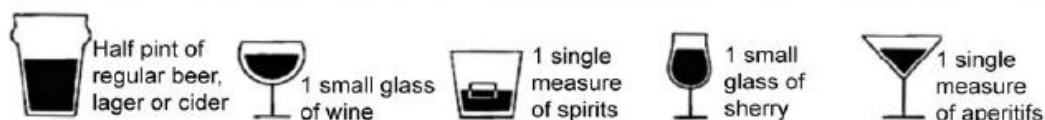
## **5.0 Recommendation**

### 5.1 Note the report

Angela Hall, Health Improvement Manager, Public Health Team, with support from Ted Haughey (Treatment Service), and Dolly Dalton (Recovery and Mentoring Service). T: 01609 533552. E: [angela.hall@northyorks.gov.uk](mailto:angela.hall@northyorks.gov.uk)

(<http://www.alcohollearningcentre.org.uk/Topics/Browse/BriefAdvice/?parent=4444&child=4898>)

This is one unit of alcohol...



...and each of these is more than one unit



AUDIT – C

Questions	Scoring system					Your score
	0	1	2	3	4	
How often do you have a drink containing alcohol?	Never	Monthly or less	2 - 4 times per month	2 - 3 times per week	4+ times per week	
How many units of alcohol do you drink on a typical day when you are drinking?	1 - 2	3 - 4	5 - 6	7 - 9	10+	
How often have you had 6 or more units if female, or 8 or more if male, on a single occasion in the last year?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	

Scoring:

A total of 5+ indicates increasing or higher risk drinking.

An overall total score of 5 or above is AUDIT-C positive.



Score from AUDIT- C (other side)



Remaining AUDIT questions

Questions	Scoring system					Your score
	0	1	2	3	4	
How often during the last year have you found that you were not able to stop drinking once you had started?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
How often during the last year have you failed to do what was normally expected from you because of your drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
How often during the last year have you needed an alcoholic drink in the morning to get yourself going after a heavy drinking session?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
How often during the last year have you had a feeling of guilt or remorse	Never	Less than	Monthly	Weekly	Daily or almost	

after drinking?		monthly			daily	
How often during the last year have you been unable to remember what happened the night before because you had been drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
Have you or somebody else been injured as a result of your drinking?	No		Yes, but not in the last year		Yes, during the last year	
Has a relative or friend, doctor or other health worker been concerned about your drinking or suggested that you cut down?	No		Yes, but not in the last year		Yes, during the last year	

Scoring: 0 – 7 Lower risk, 8 – 15 Increasing risk,

16 – 19 Higher risk, 20+ Possible dependence

TOTAL Score equals

AUDIT C Score (above) +

Score of remaining questions

