

Response, Restart and Recovery

Kent Drug and Alcohol Services

Tuesday 6 July 2021

Kent Drug and Alcohol Services

- Local authorities are responsible for commissioning treatment services for people who misuse drugs and alcohol. The Drug and Alcohol Service's across Kent deliver an open access, recovery-orientated treatment and harm reduction service for adults aged 18+.
- Services are delivered by The Forward Trust in Ashford, Canterbury, Dover, Folkestone, Thanet and Sittingbourne and the surrounding areas and Change Grow Live (CGL) in Maidstone, Tunbridge Wells, Gravesend, Tonbridge & Malling, Sevenoaks and surrounding areas.
- KCC also commission a Residential Recovery Housing Service for individuals who are in recovery of their drug and alcohol who have an accommodation need. Delivered by CGL in East Kent.

This service is across 2 sites:

Shepherd House in Folkestone- 11 Flats

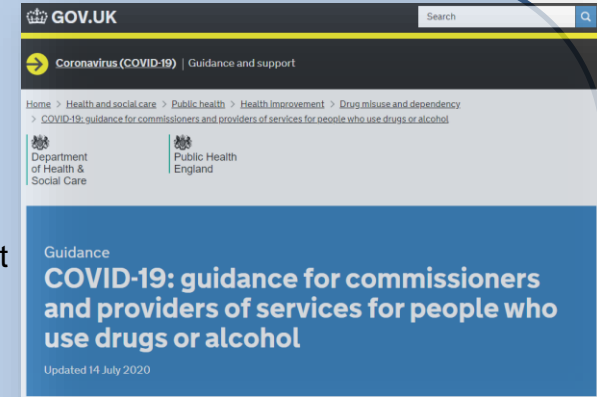
The Cedars in Canterbury- 7 Flats

Please note – The Young Person Substance Misuse service is not covered in this update as this service was presented at a previous committee.

Impact of COVID-19

National Guidance & Service Impact

- Drug and alcohol service users at greater risk of COVID-19 due to their presenting complexity and underlying health conditions, with many service users categorised as clinically vulnerable.
- Drug and alcohol services remained open, with services initially being offered remotely to protect the vulnerable at greater risk from COVID-19 and help reduce the burden on other healthcare services. Services quickly moved to home detoxing clients where safe to do so.
- Service offers associated with increased risk of COVID-19 infection due (including where intervention needed to be delivered face to face and where fluids need to be obtained), were curtailed. This included, detoxification, supervised consumption for Opiate Substitute Therapy (OST), drug testing, Blood-borne Virus (BBV) testing, and Hepatitis C treatment.
- Services risk assessed clients on OST and where appropriate and safe to do so their medication was adjusted to allow for less frequent pick up, in order to reduce risk of catching and spreading the virus and also to reduce the pressure at pharmacies.
- Services increased their provision of safe storage boxes and Naloxone for those on OST to prevent drug-related deaths and reduce the risk of harm of any dependents or children living in the households.
- As services are CQC registered PPE needs were met through the government portal.



Impact of COVID-19

Service Activity and Trends

- Drug and Alcohol services have continued to deliver support and treatment interventions throughout the pandemic.
- There was a rapid shift to online/virtual delivery and an increase in virtual consultations for service users which was received positively. Currently, there has been a blend of virtual and face-to-face delivery based on service user risk, vulnerability, and clinical need.
- During the first lockdown, services refrained from exiting service users who had completed treatment to offer consistency and wellbeing support during this period.
- Services experienced a reduction in referrals and treatment starts during the early phase of both lockdowns; however, referrals between this period rose to higher levels than before lockdown, notably for alcohol. Current data suggested this is not stable.
- Aside from the temporary lockdown-related decreases, the number of treatment starts has remained relatively stable throughout the year, highlighting that services have effectively facilitated access to treatment during the pandemic.
- Staffing levels remained stable during lockdown and throughout 2020/21.
- Treatment services have in place a digital platform that supports people in treatment, known as Breaking Free Online – activity levels on clients using this increased since March 2020.
- During 2020/21 the service managed to achieve a 27.5% treatment complete success rate, an improvement compared to 2019/20 (26.6%). The service treated 4,944 people, which was 2% lower than the previous year.”

Response and Restart

Collaboration between commissioners, Public Health England and service providers has provided an effective mechanism to respond rapidly to COVID-19 to implement several revised service models to ensure these vulnerable services users have safe access to services.

Increased partnership working at a time of reduced face to face contacts

- Flexible service offers and session times to accommodate service user need e.g., telephone, video consultation
- Increased joint appointments and regular communication between agencies to manage service user risk and share the information, e.g., Probation, Pharmacies, KMPT
- Introduction of virtual Multi-Disciplinary Team (MDT) meeting for complex service users with substance use and co-occurring mental ill-health
- Improved pick-up rate for those released from prison, ensuring continuity of care for those released into the community
- Joint training sessions with Live Well Kent and Drug and Alcohol Service to ensure smooth recovery planning for individuals
- Implementing reflective practice between drug and alcohol services and integrated children services

Increase harm reduction strategies and implementation

- Increase of 115% for the provision of safe storage boxes for those on OST (Methadone, Buprenorphine).
- Increase of 20% provision of Naloxone to prevent drug related death when accidental opiate overdose occurs
- Introduction of home-delivery Needle Exchange for service users that inject drugs.

Response and Restart

Increasing
access to
services
equitably

- The move to using digital technologies has increased access for some and streamlined approaches. It has also enhanced service user choice and there has been improvement from some groups e.g. Opiates users. We will therefore continue as blended model.
- Access to services is not limited by geography e.g. family, friends and significant other groups.
- Kent County Council and Medway Council are piloting a digital loan scheme intended to improve access to services and improve health and wellbeing Digital Inclusion Pilot – 200 devices will be loaned to vulnerable service users to enable them to join online meetings/appointments. As of 14th May 12 devices have been loaned to clients within Drug and Alcohol Service.
- Lower risk clients are given the choice of face to face or virtual appointments.
- Providing training to OneYou service to provide extended brief interventions to people who are at risk of becoming dependent to alcohol.
- Put in place outreach provision to engage 'hard to reach' service users e.g., Homeless with the recruited of three outreach workers

Drug and Alcohol Services – Future Priorities for Recovery

Building on innovation and lessons learned from the Covid-19 response

- Evaluation of new ways of working to ensure the service meets the needs of service users through service user surveys and analysis of performance data
- Continue to embed co-production and quality improvement methodology into service development and delivery
- Review and further enhance digital presence to provide more flexible access to support and services, where it is safe to do so

Phased recovery of services

- Increase face to face appointments as lockdown restrictions ease
- Increase urine drug testing and intelligent fingerprint testing in all sites and re-introduce alcohol breathalyser testing
- Medically Assisted Treatment and prescribing decisions will continue to be made via an MDT based on service user need and risk
- Re-introduce:
 - Blood-borne virus testing on-site as required
 - Routine Hepatitis B vaccination on-site
 - Blood pressure and ECG screening
 - Home visits where required
 - Home Peer Mentors and Volunteers to return to the sites to deliver specific activities and interventions – advised to minimise public travel in rush hour
- Group work to be offered face to face for those who cannot access digitally; restriction on the numbers allowed in groups

“Flexibility with appointments”

“more convenient with telephone support – especially now working”

Service user feedback

“Alleviates anxiety by not having to attend service”

“Good to have someone to talk to felt less isolated”

Case Study

- 55 year old male
- Heroin user with significant alcohol misuse
- Faced a number of eviction notices
- Difficult to engage in treatment and kept on 'falling off' his OST prescription (20 years in treatment on and off)
- Diagnosis of liver sclerosis, Hep. C positive and has other underlying health conditions
- Previous unsuccessful detox
- Using low levels of methadone for some time and decided that time to ween off after being in treatment for 20 years and embraced the online delivery
- Due to increase partnership working during COVID-19, Drug and Alcohol service was able to have multi-agency medical appointment with clinicians from the Rough Sleeping Initiative and the Hep C Trust in order to gain accommodation and set treatment goals
- Went into inpatient detox approx. 4 months ago which was successful
- Now embracing his recovery capital and engaging in a Day Programme (intensive support for people in recovery), attends the online Forward Connect Group and contributes to Kaizala (peer support group)
- Been treated for Hep. C
- Exploring options to become a peer mentor once he graduates

Contain Outbreak management funds

People who use drugs and alcohol generally have multiple health needs and often lead a chaotic lifestyle, due to this they maybe more at risk of catching and spreading they COVID-19, therefor additional funding has been made available through COMF to fund the following:

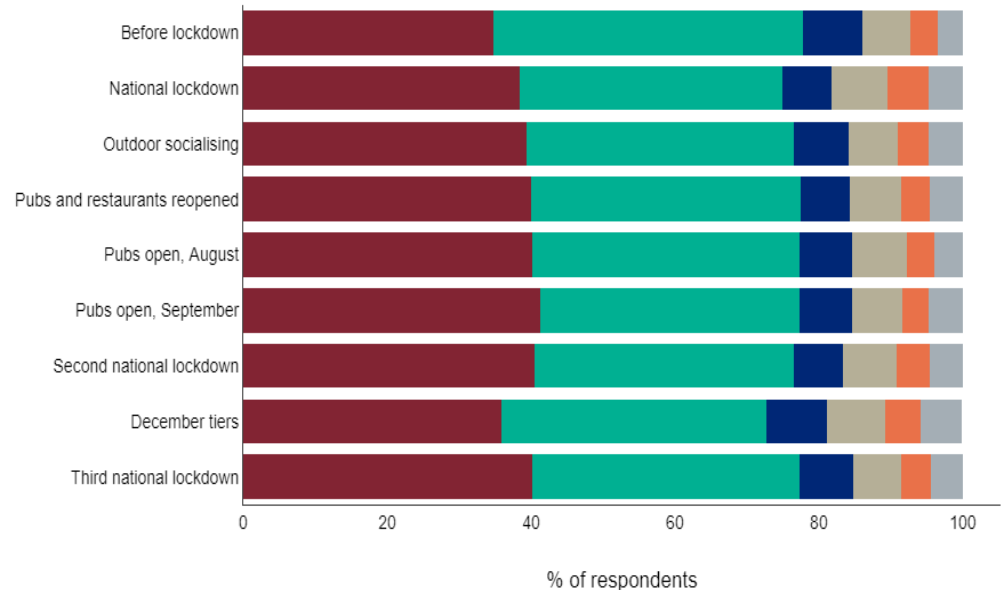
Programme	Description of Activity/Initiative
Moving Parents and Children Together Programme (M-PACT)	Moving Parents and Children Together Programme (M-PACT) is a whole family, evidence based, structured support programme which focused on children and families affected by substance misuse. Aim is to build resilience, increase coping and protective factors and identify resources to provide practical help.
Day Programme	Roll out of Drug and Alcohol Day programme across Kent .
Outreach workers	Drug and Alcohol outreach workers to protect this vulnerable group from the risks associated with COVID-19 and to make sure these individuals receive the right support needed for them to recover from their addictions and therefore reduce the risk of catching and spreading COVID-19
Assertive Outreach	Assertive drug and alcohol outreach workers for this 'treatment resistant' group who require a higher level of resource/ time to proactively engage them in treatment and coordinate their care and support needs

Impact of COVID Alcohol

Alcohol

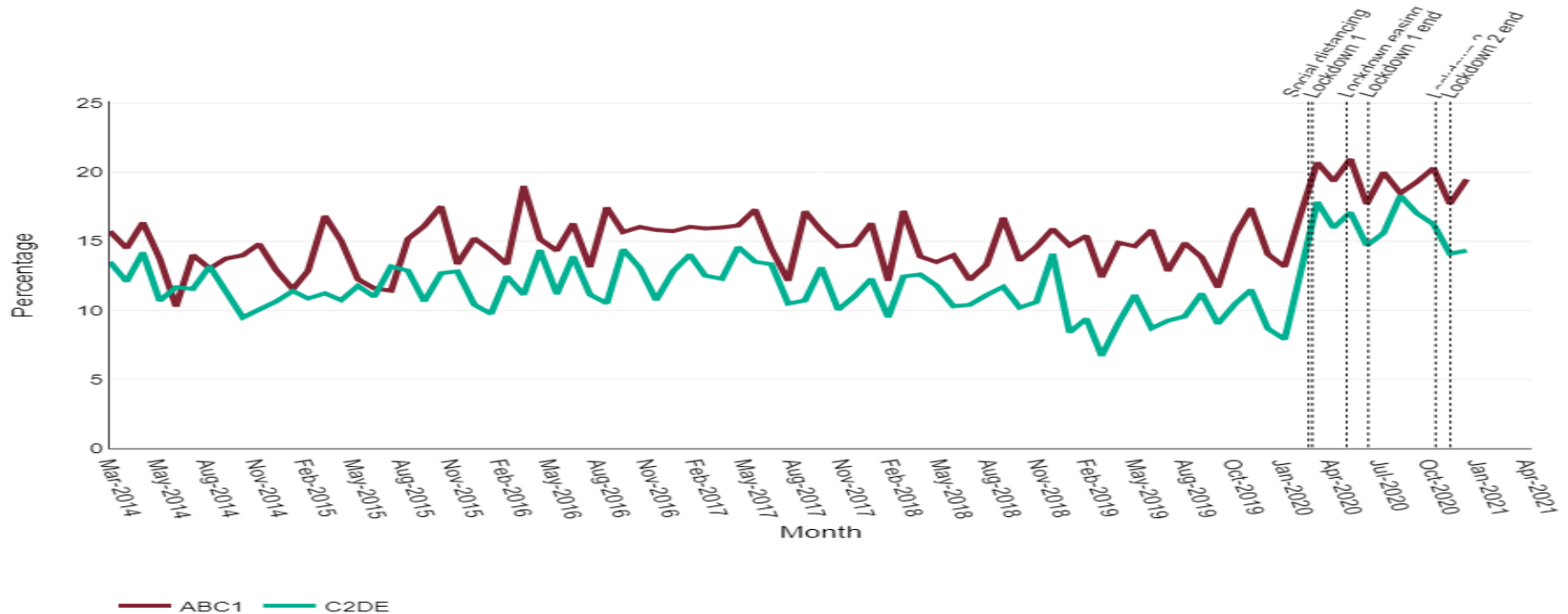
- More non drinkers in third national lockdown than before first lockdown
- There are more people now drinking in the dependent levels than before lockdown (+1.2%)
- Less non-drinkers in September with pubs were back open

Percentage of respondents aged 18+ years who consumed each of the unit grouping during a typical week in England



Impact of COVID-19 Alcohol

Increasing and higher risk drinking is generally more prevalent in the higher socioeconomic groups, as seen below. During the pandemic, this has increased noticeably both in higher and lower social classes.



Impact of COVID-19

Alcohol

- A Cambridge University study (Dec 2020) has highlighted that COVID-19 and lockdown measures drove some individuals more than others to use alcohol to cope with stress. While overall alcohol consumption appeared to fall, the found that more than one in three adults (36%) increased their consumption during the first lockdown.
- In the UK, the units of alcohol consumed per week increased from 10.94 to 11.25 units.
- Respondents with children, essential workers (specifically healthcare workers responsible for taking care of individuals with COVID-19) and those whose loved ones became severely ill or died from COVID-19, reported a greater increase in alcohol consumption during lockdown.
- Older individuals tended to increase their alcohol consumption more than younger people, from 10 to 11 units weekly, which may reflect the greater need for older people to have more stringent isolation. Men showed a decrease in both drinking amount and severity during lockdown, while women demonstrated the opposite trend.
- This demonstrates how the virus itself has affected alcohol consumption in those who have been negatively affected by COVID-19.
- Kent Drug and Alcohol Services may therefore see an increase in people needing access to the service.

Sallie S. et al. (2020) *Assessing International Alcohol Consumption Patterns During Isolation from the COVID-19 Pandemic Using an Online Survey: Highlighting Negative Emotionality Mechanisms*. *BMJ Open*; 26 Nov 2020; DOI: 10.1136/bmjopen-2020-044276, cited in <https://www.cam.ac.uk/research/news/one-in-three-adults-drank-more-alcohol-during-first-lockdown>

Impact of COVID-19

Illicit drug use and supply

- There is little reliable national data on the impact of COVID-19 on patterns of drug use and supply. Overall the effect of COVID-19 on patterns of drug-taking appears somewhat mixed, with differences observed between countries (*EMCDDA, 2020*). It is difficult to predict whether any trends triggered or accelerated by the pandemic will remain and become part of future consumption patterns e.g., more interest in online drug sales.
- PHE have shared anecdotal reports of reduced purity of certain substances such as heroin and cocaine during the early phases of the pandemic.
- The national and international picture of drug trafficking during COVID-19 is also mixed. Drug trafficking using couriers on commercial airlines or other forms of public transportation were unsurprisingly disrupted. However, seizures and intelligence data does not suggest any immediate significant disruption to major drug trafficking activities.
- Drug and Alcohol Services may see more people needing the service due to the purity of certain substances.

Summary

- People who use drug and alcohol are at greater risk of COVID-19 due to their presenting complexity and underlying health conditions.
- Evidence to suggest that people who are already dependent are drinking more during the pandemic.
- Services have adapted quickly to ensure continue support for this vulnerable client group.
- Innovation on moving support groups to a digital format has been welcoming by clients and will continue (along with face to face where required).
- Increase in partnership working with joint assessment with other agencies is encouraging and will continue to be delivered in this way
- Given the trends and service pressures the additional COMF funding will support the services meet the needs of these individuals.
- May see extra strain on capacity for any increase in demand.