

Southwark Health and Adult Care Scrutiny Sub-Committee Matters arising at the 20 January 2010 meeting

1. Request: That Susanna White report back to the sub-committee in early 2010, with the outcome of the commissioned cost assessment for renovation and repair work at Dulwich Hospital, which would allow the provision again of former services such as intermediate care

Response:

NHS Southwark board has agreed to do a range of Health & Safety improvement works to improve the existing Dulwich site. This work has started and will be completed in the summer.

2. Request: That officers provide details on the proportion of PCT budgets spent on consultation

Response:

The actual amount spent on consultation was 94,700 last year out of a total budget of 530 million.

3. Requests:

That an update be provided on the PCT decision regarding the re-structuring of drug and alcohol treatment;

That Jane Fryer relay the sub-committee's request to the Southwark PCT board, that the decision regarding the re-structuring of drug and alcohol services be delayed for a few days, to give the Health Secretary, Rt. Hon. Andy Burnham MP, the opportunity to respond to the related letter of January 14 2010 from the Rt. Hon. Tessa Jowell MP.

Response:

Extract from the DRAFT NHS Southwark board meeting minutes of 21 January 2010:

936/2010	<p>Restructuring Drugs and Alcohol Treatment Services in Southwark</p> <p>Mr. Morgan explained that the report circulated with the Trust board papers is the initial report describing the consultation process and noting the formal and informal meetings that had been held. A supplementary report had been circulated prior to the meeting detailing the comments received during the consultation process, including the comments received in writing and online. He outlined the consultation process and highlighted the attached responses from residents in the Blackfriars Road area, local elected representatives, the Health & Social Care Scrutiny sub-committee and the National Treatment Agency.</p> <p>The two main issues raised in the responses were access for service users from the south of the borough to the Blackfriars Road site and concerns from local residents about anti-social behaviour by people abusing drugs and alcohol in general and specifically service users.</p>
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In terms of the access issue Mr. Morgan stated that from the evidence available it is anticipated that clients will travel for this service, and for the small number for which access to Blackfriars Road is too difficult services will be offered at satellite clinics, such as primary care services, hostels and people's homes as they are now. It would not be possible to determine the precise locations until the needs and requirements on the individual clients had been assessed.

With respect to the issue of anti-social behaviour Mr Morgan stated that the PCT and SLAM both recognised that this is a significant concern for local residents, which required closer working with the Council's Community Safety team and the Police. Board members expressed their commitment to ensure action is taken on an ongoing basis to meet with local residents on this issue. It was agreed that Ms Kennedy (on behalf of Ms Kinnair) would include a clause within the service contract with SLAM to the effect that regular meetings would be held between the service management and local residents and that SLAM would report on the outcome of these meetings to the PCT, which would be reported to the Board.

ACTION: Ms KENNEDY / Ms KINNAIR

Mr Morgan stated that unfortunately a typographical error had been made in the report 'A Partnership Approach to the Provision of Treatment for Drug and Alcohol Misuse in Southwark' which had been published alongside the Consultation Document. The figure given for the increase in the death rate from chronic liver disease should read 50% [not 500%] and Ms. White will write to Rt. Hon. Tessa Jowell M.P. to offer an apology as she had referred to this figure.

ACTION Ms WHITE

Dr. Fryer stated that she is confident about the capacity of primary care to take on the primary care workload as envisaged in the primary care strategy and assumed in the Consultation Document and highlighted that this is not a new service. All practices providing this service undertake training and a well structured & accredited programme supported by the drugs and alcohol team is in place. Capacity of GPs to undertake provision of this service is reviewed when training arrangements are discussed. Dr. Fryer also stated that the main route of referral to the service is through primary care, but that this isn't the only access route as many clients are referred from voluntary agencies. The discharge process back to primary care will be in a planned way as in other services.

Dr. Fryer reported that the Health and Social Care Scrutiny Sub-Committee had requested that the Trust Board delay the decision pending a response from the DH to Rt. Hon. Tessa Jowell M.P.'s request for additional funding for liver treatment services. Mr. Morgan noted that the Board should be aware that the £98K capital grant from the Home Office for the refurbishment and IT integration for the new Integrated Offender Management Service was only available this financial year, and the NTA had confirmed that this funding source would be lost if the funds would not be spent by the end of March 2010.

Ms Ng invited Councillor Noakes to join the discussion. Cllr Noakes stated that the Lib Dem local elected representatives are supportive of the PCT in the aim of providing effective drug treatment services and also are aware of the financial constraints on the PCT. The Lib Dem local elected representatives also support the commissioning of GPs in the delivery of this service in line with the primary care strategy. However, Councillor Noakes requested the Board to delay the decision as there had not been enough time to thoroughly consider all the responses given that the consultation had ended the previous week and the supplementary report had only been circulated to Board members the previous day. Councillor Noakes also highlighted public concerns about the strong

perception of a trend of rising anti-social behaviour in the vicinity of CDAT and stated that he is not convinced that the proposed arrangements will achieve the PCTs stated objectives of the safety of service users, staff and the public and of improving treatment uptake.

If there is approval to relocate the specialist treatment service, Councillor Noakes drew attention to the request in the letter from the Lib Dem local elected representatives that sufficient satellite clinics should be provided and feedback obtained from clients on this. He also requested that more formal arrangements should be put in place with local residents on managing the issue of anti-social behaviour.

Mee Ling also reported that she had spoken with the office of Simon Hughes MP earlier that day who had also requested deferment of the decision until March because of the late availability of supplementary papers which need to be made available to members of the public.

Mr. Park also enquired whether there will be an individual at each of the centres to liaise with local residents. Dr. Fryer stated that this requirement will be included in the contractual process with SLAM. An ongoing communications plan is essential.

In answer to a question from Ms Caine, Dr Fryer stated that there was a history to the attempt to identify sites for these services and alternative properties had previously been identified but had failed at the planning application stage due to opposition from local residents. She noted that the reason that Marina House and the CDAT building in Blackfriars Road are the two proposed sites is because they are already in use as treatment centres for drug users.

Ms White stated that she welcomed the extent of interest in this proposal, as the PCT wished to engage with local people and service users about their needs and the services we commission for them. The advantages of this proposal should be recognised and acted on by the Board. This is a win-win situation with capital money from the government to deliver services in a way that meets our strategic objectives, including providing effective treatment to more people, including those referred from the criminal justice system in a way that we haven't been able to previously. She recognised the concerns of local residents but these would not be affected by a delay and the suggestion to defer the decision is not realistic.

The Trust Board approved the preferred option (option 3) that is the relocation of the specialist treatment services for drugs and alcohol to CDAT, Blackfriars Road with a new integrated offender management service being located at Marina House.

The Board required that the contract with SLAM for 2010/11 and beyond includes a requirement on both the services of engagement with the local communities through regular meetings and with a designated lead manager for community liaison at both sites and that SLAM present regular reports on progress to be presented to PCT Board meetings.

ACTION: Ms KENNEDY / Ms KINNAIR