Substance Misuse Needs Assessment

North East Lincolnshire 2017
SUBSTANCE MISUSE
in North East Lincolnshire

In the last 4 years, 65 babies were admitted to NICU as result of maternal drug use.

58% of drug and alcohol admissions were male...
...42% were female.

76% of drug admissions were via A&E in the last 3 years.

Alcohol admission rates are significantly higher in NEL than nationally.

The number of drug-related deaths have reduced in NEL.

60% of suicides in NEL had a history of alcohol and/or drugs abuse.

45% of suicides had involved alcohol...
...32% involved drugs.

AMBULANCE DATA
812 drug-related calls for an ambulance last year.
358 patients taken to hospital for drug-related incident.

Commissioning and Strategic Support Unit
1. **Introduction**

The following is a summary taken from the draft Substance Misuse Needs Assessment along with the recommendations that emerged from the findings of the assessment.

This substance misuse needs assessment has been compiled using a variety of local and national data sets and information sources, to assess the impact of substance misuse in the borough, and to evaluate current specialist substance misuse service provision and recovery services within North East Lincolnshire.

The aim of this needs assessment is to provide insight into the population impact of drug and alcohol use within North East Lincolnshire that will inform a future Substance Misuse Strategy. This needs assessment will be used to identify gaps or needs within the current treatment system and incorporate and implement changes into the re-procurement of specialist drug and alcohol services, to meet the needs of North East Lincolnshire residents.

The misuse of drugs and alcohol can have a profoundly damaging impact on individuals, their families, the community and the economy, often leading to family breakdown, poverty and crime. Partnership working is essential for effective prevention, early intervention, treatment and support into recovery, to improve the health, wellbeing and future prospects of those misusing drugs and/or alcohol, and their families.

**Definition of substance misuse**

Substance misuse refers to the harmful or hazardous use of psychoactive substances, including alcohol and illicit drugs. Psychoactive substance use can lead to dependence syndrome - a cluster of behavioural, cognitive, and physiological phenomena that develop after repeated substance use and that typically include a strong desire to take the drug, difficulties in controlling its use, persisting in its use despite harmful consequences, a higher priority given to drug use than to other activities and obligations, increased tolerance, and sometimes a physical withdrawal state (World Health Organization, 2017).

**Needs Assessment Surveys**

As part of the needs assessment process, three surveys were carried out from individuals accessing treatment services, partner agencies who work alongside treatment agencies and the general public to ascertain their views in respect of drug and alcohol misuse in North East Lincolnshire.
2. Summary

Key points from local data

Substance Misusers in Treatment

- The majority of users in treatment are primarily opiate users.
- Overall numbers in treatment for opiates are decreasing.
- Clients under 30 are most likely to be non-opiate users, those aged 30-44 are most likely to use opiates and the older age groups are most likely to be in treatment for alcohol.
- New clients entering treatment in the younger age groups are decreasing whilst the over 30s are increasing.
- Nationally 78% of clients waited less than 3 weeks for an appointment following a referral to treatment services, locally however for all drug users 100% received an appointment within 3 weeks of referral and 99% of those in treatment for alcohol received an appointment within 3 weeks.
- The number of clients in treatment for mephedrone has increased, however the numbers in treatment for other New Psychoactive Substance (NPS) are currently low.

Complexity of clients

- The proportion of clients with complex needs is increasing while the proportion of clients successfully completing treatment is decreasing.
- There is a high proportion of clients in treatment with very high complexity in NEL.
- Clients with high complexity are less likely to successfully complete treatment so PHE have suggested alternative ways to measure success.
- Clients with high complexity are more likely to have higher physical and mental health needs and are at higher risk of drug-related death.

Hospital Admissions

- 65 babies were admitted to neonatal intensive care as a result of maternal drug misuse over 4 years, 2011/12 to 2014/15, Grimsby Hospital (16 per year on average).
- Males were more likely to be admitted to hospital as a result of drug and/or alcohol misuse.
- Those living in the most deprived wards were significantly more likely to be admitted to hospital for drug-related conditions than the NEL average.
- The majority of drug-related admissions were via A&E (76.4%, 2036 admissions over 3 years, 2013/14-2015/16).
- NEL were significantly higher than the England average for alcohol-related hospital admissions. Males in particular were considerably higher.

Drug related deaths & Suicide

- Nationally drug-related deaths are at an all-time high, locally the rate has fluctuated but the overall trend line shows a decline.
- Those most at risk of dying from a drug-related cause were males, those aged 34-44 and those living in the 2 most deprived wards in NEL.
- 59.7% of people from NEL who died from suicide had misused drugs and/or alcohol at some point in their life, the most commonly used drug was cannabis.
Of those who died from suicide, 45.2% were found to have alcohol in their system at the time of their death and 32.3% were found to have drugs in their system, however overdose was not a common method of suicide.

Children
- There were 206 child referrals to social services where alcohol or drugs were a related factor in 2015/16 in North East Lincolnshire.
- There are 455 children known to be living with users of Foundations drug and alcohol service.
- A local survey of drug and alcohol service users showed that 28.5% had children living with them.

Drug-related calls for ambulance
- In 2016/17 there were 812 calls in NEL for an ambulance where the chief complaint directly related to drugs, 358 resulted in the patient being taken to hospital.
- The highest proportion of calls for drug related complaints were to Croft Baker ward, followed by Park and East Marsh (location of incident, not residence).
- Females aged 20-24 and Males aged 25-29 were those most likely to need an ambulance for a drug related complaint.

Data gaps

A&E - Data obtained from A&E doesn’t reflect the actual number of drug and alcohol related attendances, in reality the numbers are significantly higher based on the number of admissions to a ward via A&E for drug and alcohol related conditions and the number of calls to the Ambulance service for drug related conditions.

Ambulance Data – Access to data from East Midlands Ambulance Service (EMAS) is limited, currently the only available data relates to the chief complaint code. Further data is recorded by EMAS including an initial assessment and clinical impression, however EMAS have not responded to requests for this data. Therefore it has not been possible to obtain ambulance data relating to alcohol as there is no chief complaint code relating to alcohol.

New Psychoactive Substances (NPS, previously known as ‘legal highs’) – Whilst anecdotal evidence suggests the use of NPS is increasing and that its use is linked to problematic behaviour, particularly patients admitted to acute mental health wards, however data only shows low numbers of usage.

Mental Health – Poor mental health and drug use are undoubtedly linked, our survey alone showed over half of substance users have mental health problems and 65% have thought about suicide. However it has been difficult to obtain detailed data from services to show this.

Prevalence of drug users – The most recent, available prevalence data is out of date and may not be representative of the 2016/17 prevalence of drug users.
**Problematic alcohol users not in treatment** - There is a higher proportion of drug users to alcohol users in treatment and this was reflected in our survey, however it is likely that the number of problematic alcohol users is far larger than the number in treatment.

**Surveys - Key Points**
Three surveys were carried out as part of this needs assessment

**User survey (The following responses are from users of drug and alcohol services in North East Lincolnshire, including users of the needle exchange).**

- Most started using drugs in adolescence and cannabis was the most commonly used first drug.
- Two thirds of those who inject drugs use the needle exchange.
- 73% of those who have stopped using drugs said being in treatment helped them stop.
- 40% of drug users have overdosed and 46% of alcohol users have been admitted to hospital as a result of their drinking.
- 59% have been arrested as a result of their drug use and 44% of drinkers have been arrested as a result of drinking.
- Of those who misuse alcohol, 74% said alcohol was around in the home growing up, 65% said someone at home drank a lot and 44% said their childhood had influenced their drinking.
- 55% have educational qualifications and 50% have vocational qualifications, however 71% are unemployed.
- 14% are homeless or living in a hostel.
- People who misuse alcohol or drugs are more likely to engage in other risky health behaviours, 85% said they smoke tobacco and 13% had an unplanned pregnancy as a result of substance use.
- Furthermore, users are more likely to have poor mental health, 54% said they have mental health problems and 63% have thought about suicide.

**Community Survey**

- 65% think money on drug use prevention is money well spent.
- 80% think drug treatment should be available to addicts.
- 40% have tried cannabis.
- 90% think drug use is a problem in North East Lincolnshire.

**Provider Survey**

- Only 28% of providers think it is easy to access substance treatment services, however 76% of service users said it was easy to access treatment services.
- 83% said they know where to find information about local drug and alcohol treatment services.
- 67% have been affected by others use of drugs and/ or alcohol.

**Key points - Current Treatment Services**

- Budget availability for substance misuse continues to reduce annually by 2.6%.
Since 2013 drug and alcohol treatment services became the responsibility of local authorities.

- There is a good spread of pharmacies offering supervised consumption and needle exchange across NEL.
- Drug and alcohol treatment is currently provided by Foundations and is centrally located in Grimsby.
- Foundations is open Monday to Friday and it’s direct access hours are 9am till 4:30pm. Additionally there is a service proved seven days a week in the police custody suite.
- An additional annual grant is received from the office of the Police and Crime Commissioner for engagement with individuals alongside the criminal justice system.
- Of those in custody and eligible for class A screening, 49% tested positive, of those who tested positive 95% needed a further intervention.
- Of those arrested for alcohol related offences, 93% were referred to the Alcohol Intervention Programme.
- In addition to Foundations North East Lincolnshire Drug and Alcohol Treatment NELDAT is offered by GP’s in Partnership (GPIP). The GPIP service is based on payment by results.
- A needle exchange service operates from pharmacies across North East Lincolnshire supplying needles, syringes and other preparation equipment to the public who use drugs.
- The needle exchange aims to reduce sharing of needles and therefore reduce the risk of blood-borne diseases such as HIV, Hepatitis C and Hepatitis B. It also reduces drug litter.

**RECOMMENDATIONS – Identified key areas:**

**PROVISION OF SERVICES**

As was expected a number of the recommendations related to the provision and therefore the re-procurement of substance misuse services in NE Lincolnshire. The following are the recommendations that have been included in the specification for the procurement of The North East Lincolnshire Integrated Substance Misuse Recovery Service:

- The rise in the use of New Psychoactive Substances and the misuse of over the counter and prescribed substances was highlighted in the report. It is vital that the commissioned service provides effective information, support, harm reduction messages and treatment for those misusing these substances.
- Services for young people need to be appropriate, preventative and accessible. They should also include anonymous routes of access for support to those wanting to avoid the perceived ‘stigma’ of treatment, etc.
- Given the positive impact of providing targeted interventions to those within the criminal justice services, close working relationships with the Office of the Police and Crime Commissioner (PCC) must be maintained. It is also essential that the PCC on-going funding situation be clarified.
- Unlike the national picture the drug-related mortality rate in North East Lincolnshire has been falling. However it is essential to continue to provide universal and targeted prevention and harm reduction interventions, such as the needle exchange scheme as well as maintaining excellent referral wait times (under 3 weeks) to continue the downward trend in mortality.
The age of opiate misusers and alcohol misusers accessing treatment is rising therefore it is important that particular attention should be given by providers to the needs of this older cohort especially in respect of on-going/developing health needs.

1. DATA

The Public Health Department needs to work with the following services to close the data gaps identified in the needs assessment. This is essential in order for there to be an ongoing development of the evidence base in respect of substance use/misuse in NEL.

The services are:

- The Accident & Emergency Department - in respect of attendance data relating to drug and alcohol use.
- Hospital admissions – in respect of the recording and reporting of substance misuse
- The Ambulance Service - in respect of data relating to alcohol use.
- Mental Health Services – in respect of recording drug use data in a reportable format.

- New Psychoactive Substances (NPS) – NPS use is not recorded by services even though anecdotally its use is having an impact on those services. A method of recording use of NPS needs to be developed across the above services as well as the police.

2. EARLY INTERVENTION/PREVENTION

Three main themes emerged from the needs assessment in respect of early interventions/prevention:

- Services need to be provided to work alongside children living with an alcohol or drug user especially with the NSPCC FEDUP scheme coming to an end.
- There needs to be targeted prevention and harm reduction work carried out with vulnerable young people in order to equip them to make informed decisions in respect of substance use particularly cannabis, alcohol and NPS use in adolescence.
- A universal approach is also required that again equips young people to make informed choices in respect of substance use and ultimately prevent them from developing drug and alcohol misuse problems.

3. POPULATION LEVEL

It is evident that there continues to be a growing numbers in respect of hospital admissions due to alcohol related conditions and alcohol related mortality in NEL. Therefore it is essential there are both targeted and universal approaches developed by The Substance Misuse Strategic Development Group that will:

- bring about attitudinal and behaviour change so that people no longer think it is acceptable to drink in ways that could cause harm to themselves or others
- reduce the number of young people aged 11 to 15 drinking alcohol and the amount they drink;
- encourage parents to think about the effect of their alcohol consumption on their children even at safe levels
- reduce the level of alcohol-fuelled violent crime;
- reduce the number of adults drinking above the lower-risk guidelines;
reduce the number of people binge drinking; and
reduce the number of alcohol-related health conditions and deaths.

4. PARTNERSHIP WORKING
• In order for there to be progress made in all aspects of tackling substance misuse in NEL there needs to a full partnership approach that includes drug and alcohol services, carer services, hospital services, primary care, criminal justice services, sexual health, health and wellbeing, education, mental health services, housing, employment and the voluntary sector.

5. OUTCOME MEASURES
• To measure success of treatment provision, it is recommended that local outcome measures are developed alongside those suggested by PHE (An evidence review of the outcomes that can be expected of drug misuse treatment in England http://www.nta.nhs.uk/uploads/phe-evidence-review-of-drug-treatment-outcomes.pdf )

6. FUTURE PROJECTS
• Carry out an investigation of NPS use and the impact this is having on local services who are currently reporting anecdotally there is a growing problem in NEL.
• To run a one-year pilot programme of supplying naloxone kits to accommodation services for homeless people in North East Lincolnshire, with the intention of preventing drug-related deaths from opiate overdose and to improve our own understanding of the incidence of overdose or suspected overdose.
• To run a two year pilot that will establish a NEL Recovery Hub. This will become the centre of a wider ‘recovery’ community across the Borough providing both in-reach and outreach peer support and mutual aid within our communities.
• Ensure alcohol is considered as an area to be investigated as part of the NELC mental health needs assessment.
• Encourage treatment/recovery service providers to participate in the new online system that will help tackle harms from new psychoactive substances (Report Illicit Drug Reaction (RIDR) https://report-illicit-drug-reaction.phe.gov.uk/ ). This new tool will improve knowledge of the harmful effects of new psychoactive substances.
• Regular night club goers have a higher propensity to use drugs; this should be explored further to establish if any future provision can increase the uptake of harm reduction/treatment/recovery services from this group of the night time economy.