Summary of Feedback Received and Key Findings

Why we consulted?

Over the last four years we have had to make savings of £23m because we've received less money from central government. We have done this by becoming more efficient at what we do, by reducing some of our administrative functions and increasing our income. Throughout this period we have done our best to protect front line services.

We now have to find another £20m over the next four years, with almost £11m to be found in 2016/17. Much of this will come from further efficiencies within the council, but £4.6m will have to come from services that will impact the public.

In order to inform the budget setting process for 2016/17 we published a list of those proposals which would likely have a direct impact on service users, and sought the views from those affected and interested:

- to understand the likely impact
- to identify any measures to reduce their impact
- to explore any possible alternatives

Approach

All the proposals were published on the council's website on 3 November 2015 with feedback requested by 14 December 2015. Respondents were directed to a <u>central index page</u>, with a video message from the Chief Executive outlining the background to the exercise.

Information relating to this proposal was linked directly from this index page. This contained more detailed information on what was specifically proposed, information on what we thought the impact might be, as well as what else we had considered in developing and arriving at this proposal. Feedback was then invited through an online form, and through a dedicated email address.

Each individual budget proposal was placed on our <u>Consultation Portal</u> which automatically notified those registered that an exercise had been launched. Members of the West Berkshire community panel (around 800 people) and local stakeholder charities, representative groups and partner organisations were also emailed directly, notifying them of the exercise and inviting their contributions.

Heads of Service made direct contact with those organisations affected by any of the budget proposals prior to them being made publically available.

A press release was issued on the same date, as well as publicised through Facebook and Twitter.

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Background

The Edge is a service across West Berkshire that works with young people under the age of 18 and their families and carers, who are affected by drugs and alcohol problems. They have 60-70 clients at any one time and offer a drop-in service 5 days per week, group work, individual counselling and home visits.

The clients who use the Edge are seen for alcohol, cannabis and other drug related problems, with many of them using more than one substance. The young people may have mental health issues and often come from hard to reach groups including Looked After Children, children attending Pupil Referral Units and the Youth Offending Team.

Their treatment consists of a 12 week programme and follow-up, and in addition there is support on sexual health, emotional health and wellbeing and lifestyle issues.

The Edge employs a full time manager, plus three full time and one part time case/outreach workers. The service currently costs £168,000 per annum and is located in a council owned building in central Newbury.

It is proposed to reduce the contribution made to the Edge by £42,900. This would mean the Edge receiving £125,100 annually.

Summary of Key Points

17 responses were received, including from the following organisations:

- West Berkshire Domestic Abuse Service
- IYSS
- A personal response from the parent of a service user
- The Edge
- Unison
- Berkshire Healthcare Foundation Trust
- Individuals
- Royal Berkshire Hospital Foundation Trust

1. Are you, or anyone you care for, a user of this service?

Nine identified themselves as users or in the care of someone in use of the service.

2. What do you think we should be aware of in terms of how this proposal might impact people?

- Increase risks to young people, their families and the wider community.
- It is a lifeline for young people with multiple issues which impact on their drug use. If capacity is reduced some young people may be able to access the service when they need it most.
- Those in need of substance misuse service will not get appropriate help and support.

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- Young people with co-existent mental health issues and other high risk groups such as Looked After Children will, in the absence of the service, eventually need more expensive and longer interventions from social care and the NHS (x3)
- One member of staff will be lost from the service meaning the drop-in facility would not be able to function.
- Also the following services provided by the Edge would not be available to young people - pregnancy testing and counselling for young women, Hep C and HIV testing, C Card condom allocation, STI testing and auricular acupuncture, education, counselling, motivational interviewing, help with sexual health, healthy relationships, healthy eating, support to with access housing and benefits and finding a job.
- Young people and their families will not be able access support, advice and guidance through the service. Parents struggling with their own addictions will not be able to gain support for their children. There will be less support available for children in difficulties and less education to help them understand their parents' issues.
- Cuts to the service could affect the availability of outreach work for clients not able to access the service at the centre
- PSHE in Pupil referral Units will be at risk
- 3. Do you feel that this proposal will affect particular individuals more than others, and if so, how do you think we might help with this?
 - Young people with complex issues and the most vulnerable young people in West Berkshire including those not in education, employment or training, the homeless, young women who are pregnant or have had babies taken into care, young people who no longer get support from services closed such as youth services and Connexions, young people between 18 and 20 who cannot attend adult substance misuse services
 - Looked After Children
 - Young people with mental health problems
 - Families who are struggling with drug/alcohol issues and their neighbours and carers. Young people in abusive relationships
 - Young people who may be suffering domestic abuse, sexual abuse, sexual health problems, child sexual exploitation, bullying, other health issues, etc.
 - Highly skilled Staff provide continuous care, thus preventing the need for waiting lists for other service e.g. CAMHS. Drop-in provides a safe place for young people to go if at risk of causing harm to others and when they need support in a central, discreet town centre venue.

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- Provides support to young people who are indirectly affected by substance misuse, e.g. having an alcoholic parent. Without support of The Edge, they could develop maladaptive coping strategies, turning to alcohol or drugs themselves.
- The Edge are open to partnership working and their expertise with young people
 is highly valued by professionals who work with adults. Working with adult
 substance misuse service may improve the transition between young people's
 and adult services. Attending adult service can be stigmatizing, having a
 negative impact on young people.
- Daughter received advice, support and help with accessing other services from the Edge and without it she may not have survived. A unique service.
- Concern was expressed by RBFT that the Edge will not be able to offer the wide range of support to vulnerable young people in addition to substance misuse services, including Chlamydia screening, condoms distribution and advice on other health issues that could not be addressed by any other services including LAC service or other NHS service. This would represent a gap in services that they believe would be difficult to fill.
- 4. Do you have any suggestions as to how this service might be delivered in a different way? If so, please provide details.
 - Carefully thought out joint working with Swanswell may work if considered carefully and the specific needs of young people were taken into consideration.
 - When looking at new facilities for IYSS and The Edge a drop-in service must still be available for young people. New premises should make provision for that. if The Edge has to decrease staff, IYSS and The Edge can support each other to offer a Drop-in facility to all young people in need. Would not have to be an all day provision but a duty worker should be available at all times. Young people, especially those with drug issues, live chaotic lifestyles and often need instant support when they are in crisis so vital The Edge, continues to keep young people safe whilst trying to move them on.
 - Definitely a need for the drop in service. 9 of the comments stated that the dropin service would be impossible to run if savings were made at the suggested level. The drop-in requires 2 members of staff to be in the office.
 - Closer working with other services such as the police, CCG and Housing services should improve outcomes
- 5. Is there any way that you, or your organisation, can contribute in helping to alleviate the impact of this proposal? If so, please provide details of how you can help.
 - West Berkshire Domestic Abuse Service already joint working with The Edge, combining skills to support young people who have been affected by substance misuse and domestic abuse.
 - Joint working with IYSS will keep NEET young people engaged in positive activities and therefore reduce their drug use. IYSS to provide NEET programme

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and The Edge to provide drug advice. This could reduce the number of young people using the drop-in service.

6. Any further comments?

- It is difficult to work with young people who have substance misuse issues and reducing capacity of the Edge could have an increase on IYSS which has already had cuts. The service users have complex issues and their need is difficult to predict.
- The further comments that were cut and pasted by 8 individuals felt that the savings proposal was poorly written and expected clients to be using other services that were no longer available to them or were inappropriate.
- They also stated that cuts would put clients in grave danger especially around sexual health. (looking at what PH fund for sexual health clearly demonstrates that this is not the case and other services are freely available to all young people). The issue is that these young people with multiple needs and complex lives are only able to access help with sexual health and substance misuse issues by coming to a drop-n at the Edge.

Conclusion

There were some strong views expressed about making any cuts to this substance misuse service. It was felt that the Edge already worked well with partners and other agencies including YOT, PRUs and schools but they offered something unique to these high risk, vulnerable children in the form of the Drop-in. It was also felt that the ability of the Edge to help with a variety of issues for these young people was a huge strength that could be weakened if cuts were made. Sexual health especially was highlighted, more so than mental health.

There was very little support for working closer with the adult substance misuse service.

The CCG, RBFT and BHFT were all concerned that making cuts to the Edge would result in there being more pressure on other services, especially NHS services. They also felt that cutting the Edge budget would result in safeguarding issues.

Please note: In order to allow everyone who wished the opportunity to contribute, feedback was not sampled. Therefore this wasn't a quantitative, statistically valid exercise. It was neither the premise, purpose, nor within the capability of the exercise, to determine the overall community's level of support, or views on the proposals, with any degree of confidence.

The feedback captured therefore should be seen in the context of 'those who responded', rather than reflective of the wider community.

All the responses have been provided verbatim as an appendix to this report. Whilst this summary seeks to distil the key, substantive points made, it should also be read in conjunction with the more detailed verbatim comments to ensure a full, rounded perspective of the views and comments are considered.

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