Why We Consulted?

From 3 November to 14 December 2015, we consulted on the need to make £10.8m of savings in 2016/17. £4.6m of these savings affected frontline services. The consultation generated over 2,500 responses and covered <u>47 individual budget proposals</u>.

Shortly before Christmas, however, the Government began a <u>public consultation</u> on local government funding and proposed to reduce our funding by 44% (Revenue Support Grant). This announcement was totally unexpected, and we were faced with the challenge of finding an additional £7.6m of savings, whilst also considering increases in Council Tax.

In order to inform this process, 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 15 February 2016 with feedback requested by 7 March 2016.

Respondents were directed to a <u>central index page</u>, which outlined the overall background to the exercise, and provided links to each of the individual proposals.

Each individual page included further details on the specifics of what the proposal contained and what we thought the impact might be, along with any other elements we had taken into account.

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 publicly available.

A press release was issued on the same date, and was further publicised through the council's Facebook and Twitter accounts.

The period in which we invited responses was reduced to three weeks in this case, instead of the usual six. This is because the funding announcement from government was both unexpected and very late in the financial year. It was not possible to extend the consultation period without negatively impacting the delivery of the 2016 council budget. In order to minimise the impact of this shorter timescale, we undertook extra activities to publicise the consultation in addition to our usual channels. This included making potential consultees

aware of the impending exercise much earlier than normal via press releases and associated PR activities.

Proposal Background

In West Berkshire there are a range of services provided in order to prevent harm due to alcohol and drugs, including:

- The specialist services for people with drug and alcohol problems are delivered by a third sector provider, Swanswell. They support people who use any illegal drugs, helping them through treatment to become drug free. They also support those who are dependent upon alcohol to stop drinking and help those who are drinking at health damaging levels to cut down
- Additional support services including supervised consumption of methadone for those who use heroin and provision of a needle exchange service is also available through community pharmacists.
- Employment of a dual diagnosis nurse within Berkshire Healthcare Foundation Trust (a nurse who supports residents who have alcohol or drug problems in addition to mental health problems)
- A blood born virus service to vaccinate injecting drug users against Hepatitis A and B
- An alcohol brief intervention scheme where GPs are paid to give brief counselling to their patients who are drinking above recommended levels. Prevention activities, including campaigns and provision of resources, are also provided in a variety of venues including schools, communities, pharmacies and GP practices.

The budget for services is £911,993.

Proposal Details

To reduce the overall budget to £840,993, saving the council £71,000 (8.4%) in 2016/17.

Consultation Response

Number of Responses

In total, 19 responses were received, 15 of which included comments. Of those who responded:

- 17 from individuals
- Two from groups/organisations
 - Newbury Family Counselling Service
 - o Concerned West Berkshire Professionals

Summary of Main Points

- Substance misuse services could be funded by licensed retailers of alcohol, including clubs and pubs. Also cutting licensing hours would help to limit drinking.
- Cutting back on services to people with addiction may lead to increased cost in the long term. This client group often live unstructured lifestyles and when they decide to seek help they need it quickly. If there are shorter opening hours or longer wait for treatment they may not engage, and become worse leading to crime and personal harm, requiring medical treatment or emergency services.
- Some service users (especially cocaine users) could afford to pay for services and these people could be signposted to private services.
- There have been more referrals to substance misuse services in WB over last 10 years. The alcohol service has more referrals due to the economic downturn and there is likely to see more people needing this service due to loss of other services locally including probation, floating support and mental health services
- Cuts will affect service staff who carry heavy workloads and deal with distressing issues including death of clients/suicides/disclosure of abuse. Substance misuse staff are under a great deal of pressure and further decrease in funding could impact negatively of them and the clients.
- Substance misuse services are vitally important for many vulnerable people and need to be properly funded. Those who support people addicted to alcohol and drugs including social workers, GPs, Probation Officers, Homeless service workers and many others often rely on Swanswell to help support this client group and prevent more serious consequences
- Decreasing substance misuse services could increase demand on police, domestic abuse services and NHS services, plus affect the lives of relatives and friends.
- Difficult to prevent alcohol and drug problems since individuals may be reluctant to seek help in the early stages.
- GPs are not often sufficiently trained to support patients who need specialised substance misuse support and they need to work in partnership with Swanswell who have that specialist training.
- If the service is cut the cost to the NHS may increase eg. liver failure/cirrhosis, many cancers, cardiovascular disease, high blood pressure, falls and accidents including road traffic accidents.
- Substance misuse services, especially for those addicted to drugs are vital and must continue to be adequately funded. These services can save lives.
- Young adults are vulnerable to peer pressure that may lead to substance misuse due to youthful experimentation/lack of role models or education about the ill effects of drugs. This may be linked to suicide in young teenage males.
- No further cuts should be made in the Swanswell contract since they are currently struggling to provide a service across such a wide geographical area. There is a danger with any further cuts to the service that the threshold for eligibility would be increased leading to lack of early intervention.
- There is currently not a big enough service to provide support to all those that need it (two responses), especially high risk and hazardous drinkers.

- There is a lack of understanding on the part of commissioners about the service and what capacity they have. Any further cuts to the service will cause lack of access for vulnerable people leading to increase in crime and health
- There is a statement that any cut in the budget for substance misuse services will contravene the Department of Health Circular (Dec 2015) which states that LAs should "improve the take up of, and outcomes from, their drug and alcohol misuse treatment services".

Summary of Responses by Question

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

Five respondents identified as users of this service responses. One is a family member

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

- Those with substance abuse problems/addictions, their families, especially partners and children, and their friends. Life chances of children of parents with substance misuse difficulties are significantly negatively affected.
- The Swanswell service also helps friends and families of those with substance misuse services.
- Cutting back on services to people with addiction may lead to increased cost in the long term. This client group often live unstructured lifestyles and when they decide to seek help they need it quickly. If there are shorter opening hours or longer wait for treatment they may not engage, and become worse leading to crime and personal harm, requiring medical treatment or emergency services.
- Cuts will affect service staff who carry heavy workloads and deal with distressing issues including death of clients/suicides/disclosure of abuse. Substance misuse staff are under a great deal of pressure and further decrease in funding could impact negatively of them and the clients.
- Substance misuse services are vitally important for many vulnerable people and need to be properly funded. Those who support people addicted to alcohol and drugs including social workers, GPs, Probation Officers, Homeless service workers and many others often rely on Swanswell to help support this client group and prevent more serious consequences.
- A decrease in substance misuse services could lead to higher mortality rates, crime, homelessness and less support being available from the police in custody suites.

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?

• More needy and vulnerable people struggling with substance addiction would be the most affected and not able to access the services they need.

- Decreasing substance misuse services could increase demand on police, domestic abuse services and NHS services, plus affect the lives of relatives and friends.
- A decrease in substance misuse services could lead to higher mortality rates, crime, homelessness and less support being available from the police in custody suites.

4. Do you have any suggestions as to how this service might be delivered in a different way, but still achieve the same level of saving? If so, please provide details of any alternative proposals.

- If Swanswell are employing their own prescribing doctors the savings should be made in this area, since GPs could be caring for their patients and prescribing substitute medication for them more cost effectively.
- Alcohol brief interventions are not effective and are a waste of money. This money should be put into alcohol services within Swanswell.
- Ensure money spent on needle exchange materials is purchasing the most cost effective equipment.
- Put a small local tax (£10 per week) on late night opening pubs and retail outlets selling alcohol after 11pm and use the money to help fund the alcohol service at Swanswell.
- Reallocate smoking cessation funding to pay for alcohol and drug services.
- Use volunteers to deliver substance misuse services.
- Specialist substance misuse services cannot be delivered by GPs (three responses). They do not have the time or the expertise/training. However specialist workers could be located at GP practices to support primary care staff.
- Substance misuse services could be funded by licensed retailers of alcohol, including clubs and pubs. Also cutting licensing hours would help to limit drinking
- Could NHS funding be used for these services?
- Remodel the service so that more volunteers/peer mentors can be recruited to be trained and help deliver to increase capacity.
- There is a question re what other services are being cut within the whole of the substance misuse budget. This includes PH management, plus GP and pharmacy contracts. There is an inference that cutting LA management would have no affect on the service users.

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.

An individual private provider of services has offered to accept referrals to their private treatment clinic in central Reading.

The 'Concerned Wes Berkshire Professionals Group' state they " would be available to support an in-depth review of spend."

6. Any further comments?

Key points made here have already been included in responses to earlier questions.

Officer conclusion and recommendation can be found in the associated Overview of Responses and Recommendations document.

Deborah Joyce Senior Programme Officer Public Health and Wellbeing 8 March 2016

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.