

NORTH LANARKSHIRE COUNCIL

REPORT

TO: Social Work Committee	Subject: Report on Addiction Services
FROM: Jim Dickie Director of Social Work	
DATE OF COMMITTEE: 30 March 1999	
REPORT AUTHOR: George McInally	
REF: JD/GMCI/SG/JMCF	

1 PURPOSE OF REPORT

- 1.1 To update the Social Work Committee on the progress which has been achieved in developing addiction services in North Lanarkshire.

2 BACKGROUND

- 2.1 A report on addiction services was presented to the Social Work Committee in June 1998. This report was derived from a review of the Social Work Department's services which had been conducted by Turning Point, a specialist voluntary organisation in the addiction field.
- 2.2 The Turning Point review identified a number of key areas which required consideration and determination in order to establish an effective addiction strategy for North Lanarkshire.
- 2.3 A number of the issues which were highlighted in the review of addiction services, necessitated joint discussion and agreement with Lanarkshire Health Board and Lanarkshire Health Care Trust.
- 2.4 In the period since the last report to Committee, extensive discussions have been ongoing with the Health Board and the Health Care Trust. However, despite the commitment of all parties concerned, the overall agenda has proved to be much more complex than originally anticipated. Notwithstanding these difficulties, considerable progress has been made in developing a strategic framework to improve the delivery and access to services.

3 EXTENT OF ADDICTION PROBLEM IN NORTH LANARKSHIRE

- 3.1 Alcohol and drug misuse affects all areas of life. It is an underlying feature in a large number of referrals made to the six Social Work area teams and impacts on the work carried out in Child Care, Community Care and Criminal Justice.
- 3.2 The figures given below are based on prevalence rates and are likely to reflect an under reporting of problematic use.

3.3 ***Lanarkshire Health & Lifestyle Survey (1996)***

88% of men and 77% of women reported drinking alcohol
 63% of men and 36% of women drink on one or more days a week
 24% of men and 7% of women were in the warning zone
 (Men 22 - 50 units; women 15 - 35 units)
 7% of men and 1% of women were in the dangerous zone
 (men > 50 units; women > 35 units)

3.4 ***Estimating the Prevalence of Drug Misuse in Lanarkshire: A Report for the Lanarkshire Drug Action Team (1997)***

Estimated that there are approximately 2,600 opiate or benzodiazepine users in North Lanarkshire.

Highest prevalence estimate was in the Monklands/Cumbernauld area (1.7%).

3.5 ***The Nature and Extent of Drug Misuse Amongst Schoolchildren in Lanarkshire: A Report for the Lanarkshire Drug Action Team (1997)***

This survey of 1990 school children between school years S1 and S4 found:

71% reported having a whole alcoholic drink
 32.8% reported having at least one illegal drug.

4 CURRENT SERVICES

4.1 A Senior Community Care Officer post has been created within the Social Work Department with a particular remit in terms of alcohol and drug misuse. This post is based at Scott House and will progress the work identified in the Turning Point review of addiction services.

4.2 An Alcohol Development Officer has been appointed by Lanarkshire Health Board. The post is funded through the Scottish Office and will work in conjunction with North and South Lanarkshire Councils to develop policies and procedures to reduce the overall consumption of alcohol and alcohol misuse.

4.3 North Lanarkshire Council and Greater Glasgow Health Board have identified monies to fund a part time (50%) post to work in the Chryston / Moodiesburn area.

4.4 **Departmental Services**

There are four specialised departmental projects for people who are misusing alcohol and drugs. These are:

4.5 *Airdrie Addiction Services, 81c Hallcraig Street, Airdrie*

Staffing:	Project Leader	
	2 Project Workers	
	0.5 Admin Worker	
Number of Referrals:	(1998)	211
Main substance used:	Alcohol	106
	Drugs	105

4.6 *Bellshill Cross Centre, 171 Main Street, Bellshill*

Staffing:	Project Leader	
	2 Project Workers	
	0.5 Admin Worker	
Number of Referrals:	(1998)	164
Main substance used:	Alcohol	104
	Drugs	47
	Other	13

4.7 *Shield Centre, 27/29 Hill Street, Wishaw*

Staffing:	Project Leader	
	2 Senior Project Workers	
	3 Project Workers	
	1 Admin Worker	
	1 Warden/Counsellor (full-time)	
	1 Warden/Counsellor (part-time)	
Number of Referrals:	(1998)	224
Main substance used:	Alcohol	147
	Drugs	54
	Alcohol & Drugs	13
	Solvents	5
	Gambling	5

The Shield Centre also manages a three bedded residential unit (Shield House) and three link tenancies which can accommodate up to five individuals.

4.8 *Shield House*

Number of Referrals: (1998)		28
Main substance used:	Alcohol	14
	Drugs	13
	Alcohol & Drugs	1

4.9 *The Rushes (Young Persons Drug and Alcohol Project) Top Floor, 95 Main Street, Bellshill*

Staffing: Project Leader
2 Youth Drug Workers
Sessional staff who co work groups

Number of Referrals: (1998)		38
Main substance used:	Alcohol	22
	Drugs	16

In addition to the one to one work detailed above, The Rushes also provides Education and Prevention work; Streetwork; Group work programme with six different group work initiatives.

4.10 **Voluntary Services**

There are also two voluntary organisations who provide services to people with drug and alcohol related problems:

4.11 *Monklands Council on Addiction*

This service shares premises with Airdrie Addiction Service. It is funded through Section 10 monies and has rent free office space and some clerical support. The project has no paid staff, however, counselling is provided by 9 trained volunteers.

Number of Referrals: (1998)		87
Main substance used:	Alcohol	59
	Drugs	18
	Others	10

4.12 ***Cumbernauld and Kilsyth Addiction Service, Carron House, Town Centre, Cumbernauld***

This service is jointly funded by North Lanarkshire Council and Lanarkshire Health Board (25%/75%). The project operates with a mixture of paid staff and trained 17 volunteers.

Staffing: Co-ordinator
1 Project Worker
1 Admin Worker
17 Volunteer Counsellors

Number of Referrals: (September 1997 - March 1998) 79

Main substance used:	Alcohol	30
	Drugs	47
	Others	2

4.13 Alcoholics Anonymous and Narcotics Anonymous are self help groups which meet throughout the North Lanarkshire providing mutual support to people with alcohol and drug problems. These organisations make a significant contribution in this area with meetings in over 55 venues throughout each week.

4.14 **Health Services**

There are two Community Addiction Teams (CATS) which cover the North Lanarkshire area. One is based in Airdrie and the other in Motherwell.

4.15 ***Monklands Community Addiction Team, Townhead Clinic, Lomond Road, Coatbridge***

Staffing: Manager
4 Nursing staff (1 Coatbridge; 1 Airdrie; 2 Cumbernauld & Kilsyth)
Part time Consultant Physician

Number of Referrals: (1998) 166 (estimate)

Main substance used:	Alcohol	89
	Drugs	64
	Substance not known	13

4.16 ***Motherwell Community Addiction Team, 504 Windmillhill Street, Motherwell***

Staffing: Consultant Physician
Senior House Officer
Clinical Assistant
Charge Nurse
4 Depute Charge Nurses
Occupational Therapist

Number of Referrals:	(1998)	300	(estimate)
Waiting List:	(1998)	300	(35 weeks)

Main substance used: Information not available

4.17 *Residential Rehabilitation Services*

A variety of residential rehabilitation services are used for people with alcohol and drug problems. All of the resources are based outwith North Lanarkshire.

1997 - 1998 62 people used residential rehabilitation services
Cost: £117,429.57

1998 - 1999 34 people used residential rehabilitation services
Cost: £115,701.46 (till end of February)

5 **CURRENT DISCUSSIONS WITH HEALTH SERVICES**

5.1 The Review of Addiction Services produced by Turning Point suggested that discussion was required with Lanarkshire Health Board and Lanarkshire Health Care Trust, in order to define and agree the respective addiction responsibilities of the agencies concerned. Such discussions have been ongoing in the period since the last report to Committee in June 1998. As already indicated the overall agenda has proved to be extremely complex. Nevertheless considerable progress has been achieved on a number of important principles as follows:

5.2 **Roles and Responsibilities**

It should be noted that whilst definition of services and outlines of roles and responsibilities can be articulated, there can be no "hard" boundaries at the point of service delivery, as health needs and social needs are inextricably entwined and therefore partnership in practice between the various provider agencies is an essential element of service design and development.

5.3 It is acknowledged that the Community Addiction Teams, the Shared Care Project and the Lanarkshire Drug Service have overall responsibility for medical treatment. To this end the Health Services will therefore deal with the following matters:

- ◆ Specialist psychiatric assessment
- ◆ Substitute prescribing advice
- ◆ Detoxification (Out-patient/In-patient)
- ◆ Methadone, reduction, maintenance advice/support information/prescribing
- ◆ HIV HBV HCV testing, vaccination and appropriate counselling.
- ◆ Full physical examination/medical advice
- ◆ Harm reduction
- ◆ Drug use assessment care planning
- ◆ Advice/information/counselling
- ◆ Health improvement

5.4 The role of the Social Work Department's addiction service is recognised particularly in the area of social needs. The service provided by the Department will therefore focus on the following areas:

- ◆ Individual care planning
- ◆ Onward referral
- ◆ Advice/information

- ◆ Drug/alcohol use assessment
- ◆ Assessment for residential rehabilitation
- ◆ Crisis intervention
- ◆ Support to remain drug and alcohol free
- ◆ Relapse management
- ◆ Advocacy
- ◆ Family support/advice
- ◆ Lifestyle intervention
- ◆ Health improvement advice
- ◆ Counselling
- ◆ Drop in and telephone enquiries

5.5 The respective roles and responsibilities which Social Work and the Health Service have, have been agreed in principle, when they are finally concluded, these will be published and promoted for the benefit of client/patients and the various professional agencies who may be involved in the referral process.

5.6 **Joint Assessments**

Substantial progress has been made on establishing joint assessment procedures. The introduction of joint assessment arrangements will reduce the time taken to access services and will ensure that the individual service units will be fully aware of previous service interventions and the outcome of same.

5.7 **Referral Proposals**

Currently there are no formal referral agreements between the various service agencies. Work to formalise such arrangements is making satisfactory progress. Efforts are being concentrated on clients/patients being referred to the most appropriate service for successful intervention. For example, Community Addiction Teams can provide a detoxification service while Social Work projects can provide on going counselling and lifestyle interventions. This allows for a complementary approach and the maximisation of resources.

5.8 **Use of Residential Services**

A working group has been established with membership drawn from the Drug Action Team, Lanarkshire Health Board, Lanarkshire Health Care Trust, North and South Lanarkshire Council Social Work Departments to examine the use of residential detoxification and rehabilitation services.

5.9 Evidence gathered by the working group indicates that on a Lanarkshire wide basis the revenue costs to Social Work Departments and to the Health Board, was £543,892 in 1997/98. Expenditure to date for 1998/99 amounts to £432,126.

5.10 The working group is looking at the criteria and circumstances which should be applied for accessing residential services.

5.11 **Information and Statistics**

Currently information on drug misuse is collected by specialist drug workers completing a form SMR23 which is returned to the Scottish Office, Information and Statistics Division. The data contained in this return mainly relates to drug use and does not adequately cater for

alcohol statistics. In an effort to obtain more up to date information on the extent of the alcohol problem in Lanarkshire the SMR23 form will be amended to enable alcohol statistics to be recorded in a similar fashion to that of drugs. The SMR23 forms will be submitted in the first instance to Lanarkshire Health Board who will develop a system to extract the required information on alcohol problems. This development will lead to a better planning of addiction services.

6 ACCOMMODATION ISSUES

- 6.1 It will be necessary to develop an accommodation strategy for people who misuse alcohol and drugs. Alcohol and especially drug users often have chaotic lifestyles and may find themselves homeless for a variety of reasons including the breakdown of family relationships. The availability of a range of housing options including supported accommodation will ensure that people are not placed inappropriately in expensive residential rehabilitation units when they could access local addiction services.
- 6.2 Preliminary discussions have taken place between Social Work and Housing Departments. There is agreement in principle to develop supported accommodation in the main geographic areas of the Council to cater for the housing requirements of clients who are being assisted to deal with their use of drugs or alcohol.

7 HEALTH SERVICE DEVELOPMENTS

- 7.1 In furtherance of its addiction strategies, Lanarkshire Health Board and Lanarkshire Health Care Trust, have in the recent period been active in developing a range of appropriate services to deal with the growing problem of drug misuse. As part of this approach two new initiatives have been introduced, these concern:

7.2 Harm Reduction Project

Funded by the Scottish Office, this project aims to achieve a significant reduction throughout Lanarkshire to the harm caused to personal and public health by the sharing of injection equipment by drug users.

The objectives are to raise awareness about harm reduction and to develop syringe/needle exchange facilities throughout Lanarkshire in conjunction with the Health Board and other agencies.

To date, five needle exchange centres have been established within North Lanarkshire. The average number of needle exchange transactions is 50 per week.

7.3 Lanarkshire Drugs Service

Dr Tom Gilhooly was appointed in September 1998 to the position of Clinical Director of the Lanarkshire Drug Service. He has a staff of three full time nurses who took up post in October/November last year.

The Lanarkshire Drug Service objective is to establish a substitute prescribing programme based within primary care with appropriate support for GPs and pharmacists in line with the Drug Task Force Report and the Drug Action Team Strategy.

This service offers treatment with the ultimate objective of abstinence, promotes harm reduction, e.g. a decrease in the prevalence of injecting drug use through the

This service offers treatment with the ultimate objective of abstinence, promotes harm reduction, e.g. a decrease in the prevalence of injecting drug use through the mechanism of substitute prescribing in the short and medium term. It is a clinically led service, which operates on a Lanarkshire wide basis involving and supporting GPs who offer treatment to drug users.

At present 12 GP practices in North Lanarkshire are engaged in substitute prescribing.

- 7.4 Lanarkshire Health Care Trust have proposals to establish a centralised detoxification unit to cater for people in Lanarkshire who require to access such a service. The exact timing for this proposal has still to be identified.

8 EXISTING GAPS IN SERVICE

- 8.1 Of the 211 referrals to Airdrie Addiction Service in 1998, 97 people came from the Coatbridge area.
- 8.2 Of the 224 referrals to Shield Centre, Wishaw, in 1998, 29 people came from Motherwell.
- 8.3 These figures are unlikely to represent the actual numbers of people from those areas who would require an addiction service but represent those who can travel to a service outwith their own area.

9 SERVICE DEVELOPMENT PROPOSALS

- 9.1 The current Social Work service provision which is outlined in section four of this report highlights the geographical location of the existing services. Whilst all areas of the authority are served from the specialist units, there is an inconsistency of service delivery, particularly in the Coatbridge and Motherwell areas. In order to address this problem, it is proposed that a total of four Addiction Counsellors posts (AP2/3) be established to meet the service requirements in Coatbridge and Motherwell. Acceptance of this proposal will ensure that clients in these localities will have direct access to locally based services.
- 9.2 The employment of the additional workers will mean that the main population areas of the Council will be fully covered and adequate service resources will be available to deal with the increasing demand for addiction services. Furthermore, the extra staff will help with the anticipated increase in referrals for social need provision which are expected to come from the Community Addiction Teams in line with the co-ordinated approach to service delivery.
- 9.3 Existing Social Work projects are more likely to meet the needs of older clients who respond to the model of one to one counselling. The Department services in Airdrie, Bellshill and Wishaw will review how they currently offer services to younger people in order to be more responsive to this group.
- 9.4 The cost of establishing the four new posts will be £63,000. However, some of this expenditure can be offset against a reduction in costs which are currently incurred through the use of residential rehabilitation services. An increase in local services will mean that there will not be the same requirement for people to be admitted to specialist rehabilitation units.

10 CHANGE IN SERVICE TITLE

- 10.1 Services to people who misuse drugs and alcohol are commonly known as the Council's Addiction Services. This terminology is considered to be outdated and can be a disincentive for people seeking assistance with their problem. It is therefore proposed that the title of Addiction Service be replaced with Substance Misuse Services.

11 PERSONNEL IMPLICATIONS

- 11.1 The request for four additional addiction counsellor posts be referred to the Personnel Committee for approval.

12 FINANCIAL IMPLICATIONS

- 12.1 Members will recall that there were savings made in the Addiction budget when Calderhead Addiction Service closed in April 1997. It is proposed that £30,000 of these savings be used to meet the costs of the four proposed addiction counsellor posts. A further £35,000 would be obtained from the Residential Rehabilitation budget.
- 12.2 The cost of the Senior Care Officer post highlighted at Section 4 of this report, has been built into the Social Work Department's revenue estimates which have been approved as part of the budget process.

13 CONCLUSIONS

- 13.1 There is an increasing incidence of alcohol and drugs misuse in North Lanarkshire in line with national trends.
- 13.2 Alcohol is still the most common substance misuse in North Lanarkshire although an increase in injecting drug users presenting at the Airdrie Addiction Service is significant.
- 13.3 That considerable efforts are being made by the statutory agencies to respond to the growing problem within the area. However there is a deficiency of staff resources within the Social Work Department to meet the present demands for services and the anticipated future demands.
- 13.4 Reasonable progress has been made between the Council and the local Health Services in developing appropriate responses to the drug and alcohol problems which exist in North Lanarkshire.

14 RECOMMENDATIONS

Committee is requested to:

- i) Note the report
- ii) To remit request for additional staff to Personnel Committee.
- iii) Request additional report once formal agreement has been reached with the Health Board and Health Care Trust on the adoption of the Addiction Strategy for Lanarkshire.
- iv) Agree that the title of Addiction Services be changed to Substance Misuse Services.

Kathy Semor

JD **Jim Dickie**
Director of Social Work
March 1999

For further information on this report please contact , Principal Officer (Strategy) (TEL: 01698 332063)