

**HEALTH SCRUTINY PANEL**

A meeting of the Health Scrutiny Panel was held on Monday 19 February 2024.

**PRESENT:** Councillors J Banks (Chair), M Storey (Vice-Chair), C Cooper, D Jackson, J Kabuye and S Tranter

**PRESENT BY INVITATION:** Mayor C Cooke

**ALSO IN ATTENDANCE:** A Monk (Medicines Optimisation Pharmacist) (North of England Commissioning Support (NECS))

**OFFICERS:** M Adams, J Bowden and G Moore

**APOLOGIES FOR ABSENCE:** Councillors D Coupe and J Walker

23/34 **DECLARATIONS OF INTEREST**

There were no declarations of interest received at this point in the meeting.

23/35 **MINUTES - HEALTH SCRUTINY PANEL - 16 JANUARY 2024**

The minutes of the Health Scrutiny Panel meeting held on 16 January 2024 were submitted and approved as a correct record.

23/36 **OPIOID DEPENDENCY - WHAT HAPPENS NEXT? - AN UPDATE**

In 2021, the Executive had considered the Health Scrutiny Panel's final report on Opioid Dependency - What Happens Next? and approved the action plan responding to the scrutiny panel's recommendations.

At the meeting, the Head of Health Inclusion for Public Health South Tees was in attendance to provide an update on the progress made with implementing the recommendations and an update on the current in-house Substance Misuse Clinical Prescribing Service, including:

- an overview of how the service was planned, developed and implemented safely, in conjunction with relevant partners and stakeholders;
- information on service demand (both previously at Foundations and for the in-house service); and
- an outline of opportunities, benefits and challenges associated with service delivery.

Members heard that the Substance Misuse Clinical Prescribing Service had been brought 'in-house' in October 2023 and joined together with the Council's Care Coordination Team. It was explained, however, that Recovery Connections (as the lived experience recovery organisation) was still commissioned to offer residential rehabilitation and community recovery support. Recovery Connections was a local peer-led, substance use recovery charity based in Middlesbrough.

It was explained to the scrutiny panel that, previously, Foundations had delivered primary care on behalf of the North East and North Cumbria Integrated Care Board (ICB) and the specialist clinical element of the substance misuse service. In 2023, Foundations had served notice on its contract and it had ceased to operate on 30 September 2023. The primary care provided by Foundations had now been subsumed by other primary medical care services. Furthermore, the specialist prescribing that had been offered by Foundations was now delivered by the in-house Substance Misuse Clinical Prescribing Service.

Although there had been a requirement for the Local Authority and the ICB to work to extremely challenging timescales, a smooth transition for patients had been achieved and there had been no break in service provision.

In terms of the in-house Substance Misuse Clinical Prescribing Service, Members heard that the prescribing regime had been slightly changed and the supervised consumption rates had slightly increased, meaning they were now in line with the guidelines published by the National Institute for Health and Care Excellence (NICE).

In addition to the changes in provider, Live Well East in Berwick Hills was opened and now operated as the main alcohol and drugs recovery hub, providing a wide range of support that included prescribing, psychosocial interventions, counselling, and recovery support. Members heard that, although the service could no longer be provided in the building that had previously been occupied by Foundations on Acklam Road, a building close by, on Ayresome Green Lane (previously occupied by the Middlesbrough Alcohol Centre of Excellence (MACE)) was now operating as Live Well West. That meant those who had previously accessed support at Foundations could continue to access support in a location that was convenient for them. In addition, Live Well South had been opened in Hemlington. It was explained that the primary hub for alcohol and drugs recovery support was Live Well East. It was highlighted that over half of Middlesbrough's treatment population lived in East Middlesbrough, therefore, it had been of fundamental importance to ensure support could be accessed in that locality.

The client feedback received demonstrated that the new operating model had impacted on the availability of illicit methadone. Previously, the use of the drug had been extremely prevalent in the local area and it was now extremely difficult to access, which meant that an increased number of residents were seeking specialist prescribing support.

It was highlighted that the in-house Substance Misuse Clinical Prescribing Service was registered with the Care Quality Commission (CQC). A CQC Compliance Manager had been employed to ensure the service was compliant in respect of each area of the assessment framework and to assist the service in achieving the best judgement/rating possible.

A new incident mapping process had been developed, meaning a full investigation would be conducted to determine the reasons for each incident and any findings would be utilised to inform the training/development of staff members.

Members heard that there had been some community concerns regarding the location of the alcohol and drugs recovery hubs. However, work had been undertaken to effectively alleviate those concerns, and reduce the number of reported incidents, by holding regular meetings with ward councillors and other key partners. It was highlighted that engaging and working with local communities was of the utmost importance.

It was referenced that the action plan update, which had been circulated with the agenda pack, provided a detailed account of the work that had been undertaken by Public Health South Tees to implement the recommendations of the Health Scrutiny Panel, following its review of Opioid Dependency - What Happens Next?

In terms of recommendations m), n) and o), the Medicine Optimisation Pharmacist advised that:

- To ensure the patients registered with Foundations continued to access primary medical care services, the ICB had undertaken work to ensure all patients registered for GP services were allocated to an alternative practice.
- In terms of opioid prescribing for pain management, in 2021/22 work had been undertaken across the Tees Valley to determine the levels of prescribing and education sessions had been undertaken with GPs and practice-based pharmacists to identify those patients who would benefit from opioid reduction. As a result, the levels of opioid prescribing had reduced across the Tees Valley, particularly in Middlesbrough. It was explained that the latest data indicated a reduction of 42% in high dose opioid prescribing across the Tees Valley and 25% nationally. It was explained that although prescribing across the Tees Valley was decreasing at a greater rate, the rate of high dose opioid prescribing remained higher in the Tees Valley, than nationally and there was still work to do. It was envisaged that during the coming year, targeted visits to GP practices would be undertaken and additional education sessions would be undertaken.

The Mayor commented that some of Middlesbrough's residents were taking small amounts of methadone and living fulfilling lives but were still accessing the Substance Misuse Clinical Prescribing Service. It was commented that work had now been undertaken to enable those residents to stop taking methadone. Members heard that, previously, high doses of methadone had been prescribed without reduction planning to lower doses. Recovery was very much a focus of the in-house Substance Misuse Clinical Prescribing Service. The importance of extending the health offer for those requiring alcohol and drugs support, was highlighted, to ensure a bespoke package of support could be tailored to meet and address an individual's needs.

A Member raised a query in respect of the location of services. In response, the Head of Health Inclusion advised that previously, the predominant offer of support had been delivered by Foundations on Acklam Road and the MACE on Ayresome Green Lane, meaning that residents living in other areas of the town had been required to travel to receive support. Now, the main site offering support was located in Middlesbrough East, which was the area where the majority of service users resided. It was explained that Live Well East, Live Well West and Live Well South were located in hot spot areas where there were high levels of substance misuse. The current offer provided enhanced geographical coverage of support. The Mayor commented that additionally, work was being undertaken to move the Live Well Centre, currently located in Dundas House, to the Cleveland Centre.

A Member raised a query regarding aftercare for those who had previously accessed the in-house Substance Misuse Clinical Prescribing Service. In response, the Head of Health Inclusion advised that Recovery Connections had been commissioned to provide ongoing support for those recovering from drug addiction. It was explained that Recovery Connections offered peer led support and lived experience activities and initiatives. It was highlighted that lived experience ambassadors helped clients through their recovery journey, free from stigma or discrimination.

It was highlighted that Recovery Connections had undertaken work that had resulted in Middlesbrough being hailed, nationally, as an exemplar for the Inclusive Recovery Cities Initiative. Inclusive Recovery Cities was an approach which aimed to support communities and individuals affected by addiction, emphasise the positive value that people in recovery had to wider society and remove the shame and stigma around addiction.

The Head of Health Inclusion commented that funding had been secured to expand the Live Well East offer and make better use of the building. The investment would enable development of a holistic offer, which planned to provide two dedicated spaces, one for opioid prescribing and the other for alcohol support.

A discussion ensued and concerns were raised regarding the availability of strong and cheap alcohol to vulnerable cohorts in the town, particularly super strength cider. The Mayor commented that work was being undertaken with the Council's Licensing Committee, with an aim to try and legislate against that, with the development of an enhanced trading standards offer for those premises that serve vulnerable cohorts. The Head of Health Inclusion advised that in terms of treatment for substance misuse, detoxification was followed by primary and secondary residential rehabilitation. Whilst the detoxification removed the physical dependency, the rehabilitation focussed on the addressing the psychological and social effects of drug and alcohol dependency. In addition to developing an enhanced trading standards offer, the importance of providing people with the tools and coping strategies to make informed choices was highlighted. It was explained that work was being undertaken to support key partners to gain Registered Social Landlord status, as the lack of decent accommodation was the most significant barrier to making and sustaining positive behavioural changes.

A Member requested information and data on those local areas where prevalence of alcohol and drug use was high. The Head of Health Inclusion confirmed that the requested information would be circulated to the scrutiny panel.

## **AGREED**

**That the information presented to the scrutiny panel be noted.**

Members were invited to consider, discuss and agree the draft terms of reference proposed for the review of Avoidable Deaths and Preventable Mortality, which had been circulated with the agenda papers for the meeting.

## **AGREED**

**That the terms of reference be agreed as follows:**

- a) To examine key data and information on Middlesbrough's:**
  - **leading causes of avoidable deaths (those that are either preventable or treatable); and**
  - **risk factors for ill health.**
  
- b) To investigate the work undertaken by Public Health and the NHS to reduce the number of avoidable deaths, including:**
  - **public health primary, secondary and tertiary prevention interventions; and**
  - **healthcare interventions.**
  
- c) To identify evidence-based best practice to tackle the local population's major risk factors driving preventable ill health and avoidable deaths.**

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## **OVERVIEW AND SCRUTINY BOARD - AN UPDATE**

The Chair explained that at the meeting of the Overview and Scrutiny Board, which was held on 18 January 2024, the Board had considered:

- the Executive Forward Work Programme;
- the scrutiny feedback on the Budget Consultation; and
- information on Phase Two of the Local Government Ward Boundary Review.

In addition, Members heard that at the meeting on 7 February 2024, the Board had considered:

- the Executive Forward Work Programme;
- an update from the Executive Member for Environment;
- an update on the Boundary Review 2023/24;
- the OSB Work Programme; and
- updates from the Scrutiny Chairs.

## **NOTED**