

DRAFT SAVINGS PROPOSAL

Proposal Title:	Health E1 Homeless Drug and Alcohol Service (RHDAS)		
Reference:	SAV / HAC 015 / 21-22	Savings Type:	Reduction in provision
Directorate:	Health, Adults & Community	Savings Service Area:	Public Health
Directorate Service:	Community Safety & Substance Misuse	Strategic Priority Outcome:	7. People live in safer neighbourhoods and anti-social behaviour is tackled
Lead Officer and Post:	Ann Corbett, Divisional Director, Community Safety	Lead Member and Portfolio:	Cllr Rachel Blake, Deputy Mayor and Cabinet Member for Adults, Health and Wellbeing

Financial Impact:	Current Budget 2020-21	Savings/Income 2021-22	Savings/Income 2022-23	Savings/Income 2023-24	Total Savings/Income
Budget (£000)	122	(102)	-	-	(102)

Staffing Impact (if applicable):	Current 2020-21	FTE Reductions 2021-22	FTE Reductions 2022-23	FTE Reductions 2023-24	Total FTE Reductions
Employees (FTE) or state N/A	-	-	-	-	-

Proposal Summary:

The Health E1 primary care contract is delivered by the East London Foundation Trust (ELFT). The Health E1 Homeless Drug and Alcohol Service (RHDAS) contract is managed by the Drug Alcohol Action Team (DAAT). The existing contract was awarded to ELFT on 1st January 2017 and will expire on 31st December 2020. This proposal is to discontinue this service provision on the contract end date subject to a three-month notice period to allow a safe transfer of care. This will realise a saving of £101,667. This saving will be to the Public Health Grant.

RHDAS provides drug and alcohol treatment interventions to Health E1 registered practice population with identified substance misuse needs. The nature of this cohort means many are vulnerable individuals with complex needs and co-morbidities, who are challenging to engage and resistant to access mainstream substance misuse treatment services.

Revised Provision:

In the previous twelve-month period, RHDAS delivered their service to 87 service users. Access to treatment for this cohort post contract end will be via the generic treatment pathway. The DAAT has recently applied to PH England for a grant from the Rough Sleeping Drug and Alcohol Treatment grant 2020/21. The grant will fund an enhanced pathway into treatment and recovery for this complex cohort and in part mitigates some of the impact. This would include specific assertive outreach, peer support and care coordination, as well as 'ring fenced' clinical support through Non Medical prescribers and Psychology. Further work will be needed to look for further savings in the spend on substance misuse and identify alternative pathways of support through existing services.

Risk and Mitigations:

Transition and continuation of care within the generic Reset Treatment System. The RHDAS cohort are one of the most complex and vulnerable service users cohorts who access substance misuse treatment. They are at high risk of harm including risk of drug/alcohol related death. The transfer of these service users will need to be carefully overseen by the treatment provider ensuring that individuals are safeguarded, transitioned successfully and retained in treatment.

RHDAS Equalities impact

Women within this cohort have specific needs such as child care and maternity requirements, physical/sexual abuse, prostitution, sexual/mental health and stigmatisation. These could form barriers to women accessing treatment. In order to mitigate against these barriers, the Reset Enhanced Rough Sleeping Pathway, if the bid successful, has a specific women's rough sleeping navigator to ensure the cohort is supported.

Resources and Implementation:

SAVINGS PROPOSAL – BUDGET EQUALITY ANALYSIS SCREENING TOOL

Trigger Questions	Yes / No	If Yes – please provide a brief summary of how this impacts on each protected characteristic as identified in the Equalities Act 2010. This will need to be expanded in a full Equality Analysis at full Business Case stage.
Does the change reduce resources available to address inequality?	Yes	Women within this cohort often face multiple disadvantage and have specific needs such as child care and maternity requirements, physical/sexual abuse, prostitution, sexual/mental health and stigmatisation. These could form barriers to women accessing treatment. In order to mitigate against these barriers, the Reset Enhanced Rough Sleeping Pathway, if the bid successful, has a specific women's rough sleeping navigator to ensure there is a gender informed approach, this vulnerable cohort is supported and risks mitigated.
Does the change reduce resources available to support vulnerable residents?	Yes	
Does the change involve direct impact on front line services?	No	
Changes to a Service		
Does the change alter who is eligible for the service?	No	
Does the change alter access to the service?	Yes	
Changes to Staffing		
Does the change involve a reduction in staff?	No	
Does the change involve a redesign of the roles of staff?	No	

Summary:	
To be completed at the end of completing the Screening Tool.	
Based on the Screening Tool, will a full EA will be required?	Yes

Additional Information and Comments: