

The English Substance Use Commissioners' Group Annual Report 2020/21

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1. Foreword by the Chair

The English Substance Use Commissioners Group was founded in June 2020 following discussions with The Association of Directors of Public Health, The Local Government Association and local government commissioning representatives. It was acknowledged that the alcohol and drug sector would benefit from a unified voice of local government commissioners, a group often excluded from national debate.

An initial steering group of the willing was convened and secretariat support established, made up of the following:

Interim Steering Group (June 2020-July 2021):

- **Chris Lee (Acting Chair)** | Lancashire County Council
- **Niamh Cullen** | Calderdale Metropolitan Borough Council
- **Mark Knight** | Greater Manchester Combined Authority
- **Rosalie Weetman** | Derbyshire County Council
- **Ben Hughes** | Essex County Council
- **Will Haydock** | Dorset Council (*Until March 2021*)
- **Kim Hager** | Cornwall Council (*From March 2021*)

Secretariat:

- **Enyal Lani** | Association of Directors of Public Health (*Until March 2021*)
- **Katla Arnarsdottir** | Association of Directors of Public Health (*From March 2021*)

The group has quickly established itself, getting solid support at the national forums (all online due to COVID) and with the broader sector. Of note, the group has built strong links with Collective Voice, NHS Addictions Provider Alliance (NHS APA), Adfam and the Lived Experience Recovery Organisation Group as well as Public Health England.

Representatives of the group have been sought to sit on a range of working groups in the sector, bringing a coordinated input of the commissioner voice as well as representing the collective body on numerous consultations and events. At the time of writing, this includes supporting the development of recommendations following Dame Carol Black's independent review of drugs, the NHSAPA national conference, Low Dead Space Syringe working group as part of the Hepatitis C elimination working group, Unlinked Anonymous Monitoring (UAM) Survey of People Who Inject Drugs (PWID) Stakeholder Working Group and Peers Who Volunteer Steering Group.

Finally, the members agreed a number of working groups with a view to actively contributing to the sector's development and to support our own wider network. Groups include Alcohol and Drug Related Deaths, Workforce Development and Inpatient detox/Residential Rehabilitation. Other groups were identified but paused due to the Dame Carol Black Review which was in development during this year.

The support and enthusiasm of members to come together and participate in improving knowledge and practice and just support one another has been a real asset and the group can now build and develop to both influence and support the wider sector.

Finally, thanks must go to ADPH and LGA for supporting our development, to the initial steering group for giving up their time during an unprecedented global pandemic, a time that has stretched us all beyond our normal working and general way of life, and to all those who joined and contributed.

Chris Lee

Interim Chair of the
English Substance Use Commissioners' Group

2. About the ESUCG

The English Substance Use Commissioners Group (ESUCG) is an England-wide strategic and supportive forum to bring together those with commissioning responsibility for substance use services, for improved population and individual level outcomes relating to the use of alcohol and other drugs. The ESUCG provides an important space for commissioners to meet, network and work together to improve the commissioning and delivery of integrated services and strategies locally.

Substance use services cut across a broad range of sectors, including health and social care, justice, education and the third sector. However, local government commissioners of substance misuse services were underrepresented on the national level. Hence, the ESUCG was established in 2020, with support from the Local Government Association (LGA) and the Association of Directors of Public Health (ADPH), to provide a safe space for those professionals to share resources and coordinate efforts to engage with regional and national colleagues as well as other organisations to enact meaningful change and population-level health improvement.

Upon its establishment, the ESUCG agreed to:

- Operate an opt-in membership approach
- Work to agreed terms of reference and a work plan which will be reviewed annually by its members
- Run a split agenda: a dedicated commissioner forum and a space to engage the wider sector
- Be organised by an Executive Committee elected by the members every three years
- Be administrated by a secretariat function provided by ADPH

The ESUCG's objectives are:

- To support the development of good practice and commissioning approaches for the delivery of effective outcomes from substance use services, within a multiple commissioner landscape in England.
- To support a sector-led improvement approach by commissioners: to share information, challenges, ideas, models of good practice and to support problem solving in order to protect and improve health of local communities, families and individuals, reduce health inequalities and improve the quality and cost effectiveness of commissioned services.
- To develop a new set of commissioning standards for substance use services that drive quality and outcomes for local populations.
- To share intelligence on population needs and emerging issues in relation to alcohol and other drug use, drawing on national and regional data.
- To influence and offer guidance on current and new legislation and alcohol and drug policy and strategy at a local, regional and national level.
- To support a whole system approach and work with partners across the system including the government, local authorities, NHS England, Public Health England (PHE) and other relevant organisations such as the LGA and the ADPH.
- To enable national representation of substance use commissioners.
- To develop strong working relationships with other organisations and groups in the substance use sector, including lived experience representatives, service provider groups and statutory agencies.

3. Executive Committee

After being established in June 2020, the ESUCG was presided over by an interim Steering Group, six commissioners who met informally to lead on putting governance structures and a workplan in place, in consultation with members. The Steering Group members took on this role voluntarily and were not remunerated.

A year on, in summer 2021, it was felt that the Group should seek legitimisation and ensure democratic representation by triggering an elections process. It was decided that the ESUCG should be governed by an Executive Committee comprising of elected members from each region in England: North East, North West, Yorkshire & Humber, East Midlands, West Midlands, East of England, South East, South West and London.

In order to establish an executive function to help drive the development and work of the ESUCG forward, nominations were sought from ESUCG members (local government service leads or commissioners with strategic leadership of substance use services) and a total of 15 nominations were received. The Executive Committee for 2021-2024 has representation from across all of England's regions. Its members are:

- East of England: Ben Hughes (Vice Chair) and Alistair Flowers
- East Midlands: Sarah Quilty
- London: Andy Brown
- North East: John Liddell
- North West: Chris Lee (Chair) and Mark Knight
- South East: Lisa Byrne
- South West: Karen Wood and Kim Hager
- West Midlands: Jayne Randall and Tony Bullock
- Yorkshire & the Humber: Niamh Cullen (Vice Chair), Angela Hall and Daniel Burn

The new Exec will meet quarterly to provide oversight of workstreams, review direction of travel and strategic focus for the group's role in the wider sector.

The role of the Executive is to:

- Enable the ESUCG to develop and deliver its objectives, terms of reference, annual work plan and deliverables.
- Participate in ESUCG meetings (3 per year) and Executive Committee meetings (3 per year).
- Undertake specific aspects of policy and consultation work where required.
- Organise national meetings, identify priorities, agree content and invite guest speakers.
- Seek funding for the on-going work of the ESUCG where appropriate.

- Promote membership, input and feedback from other substance use commissioners within their region.
- Gather and represent the views of the ESUCG in national consultations and the development of national policy and standards etc. where appropriate/required.
- If required to meet as voting members only to address relevant commissioning issues
- Give direction to the secretariat function.

The term of office for the Executive Committee is three years. The full membership must stand down at the end of this term but there is no limit to the number of three-year terms a member may serve.

4. National Activity

Since its establishment, the ESUCG has become a highly active network, engaged with partners across the system and with a voice on the national level. These achievements were all against the backdrop of the COVID-19 pandemic and the pressure this placed on public health professionals at every level.

Highlights of the group's activities over 2020/2021 are listed below:

- **Establishing** an interim Steering Group and appointing a Chair
- **Hosting** four national meetings online for members
- **Setting** up an online forum for the group
- **Submitting** a response to the consultation on the second part of Dame Carol Black's independent review of drugs
- **Running** multiple roundtable events to inform the consultation response
- **Supporting** PHE and providers with national discussions around supervised consumption
- **Becoming** a member of the PHE National Substance Misuse Briefing Group
- **Building** a sectoral working collaboration with Collective Voice and NHA Addictions Provider Alliance (APA)
- **Presenting** at the Substance Misuse Management in General Practice (SMMGP) National Conference
- **Engaging** with the Home Office, PHE, Cabinet Office, Making Every Adult Matter (MEAM), Collective Voice, NHS APA, SMMGP, Dame Carol Black, the LGA, the ADPH and National Recovery Lead
- **Establishing** a governance structure, including Terms of Reference, a Conflict of Interest monitor and a formal elections process

5. Membership

Membership of the ESUCG is open to anyone involved in the leadership or commissioning of alcohol and drug services for local government or local authorities.

A total of 142 substance use leads have joined the ESUCG over the course of its first year. The group's membership is spread across England's regions, as demonstrated in the below chart.

In July 2020, attendees at the ESUCG's first Full Group Meeting were asked about their expectations for the group. This type of consultation activity has been repeated since to continue informing the group's agenda and priorities.

Out of the responses in July 2020, some main themes emerged:

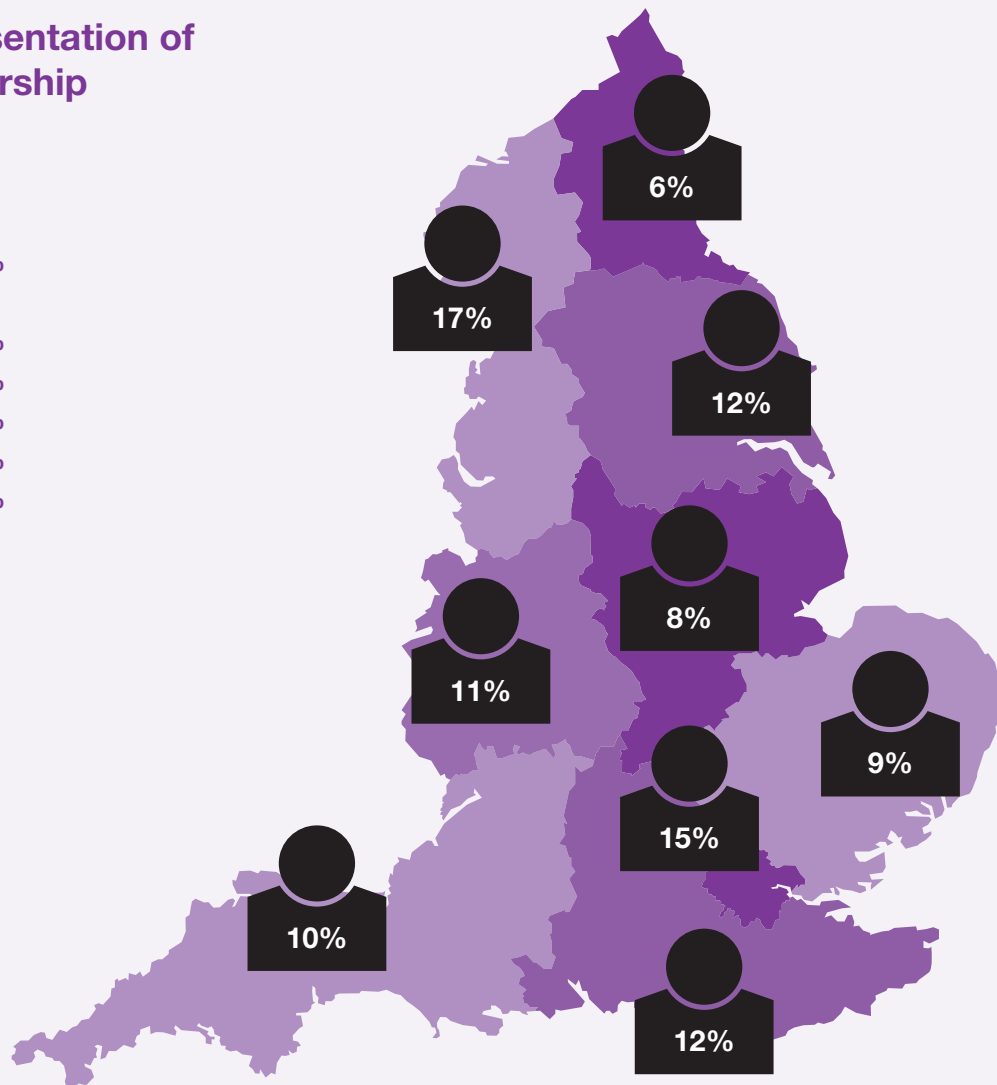
1. **Peer support and networking** – connecting with other commissioners, supporting one another and receiving/providing advice
2. **Advocacy and influencing** – driving forward priorities nationally from a local commissioning perspective; being a collective voice
3. **Knowledge and resource sharing** – learning from other local areas, both good practice and avoiding mistakes

Above all, the desire was to enact positive change to the lives of those affected by drug and alcohol use through this forum.

Regional representation of ESUCG membership

As of May 2021

East Midlands	8%
East of England	9%
London	15%
North East	6%
North West	17%
South East	12%
South West	10%
West Midlands	11%
York & Humber	12%



Above all, the desire was to enact positive change to the lives of those affected by drug and alcohol use through this forum.

6. Full Group Meetings

Four virtual Full Group Meetings have been hosted by the ESUCG in 2020/2021 – on 29 July 2020, 4 November 2020, 3 February 2021 and 5 May 2021. These were all hosted using Microsoft Teams given the need for remote working during the pandemic, which also actually increased accessibility and reduced costs. There is however scope in the future to consider face-to-face meetings as part of the ESUCG work programme.

Programme

Full Group Meetings have been run in a two-hour webinar format, with updates on the ESUCG’s activities given at the start, followed by external speaker slots and closing with a slot on innovative practice in substance use commissioning (usually an opportunity for a member to share an example of their local practice).

Topics and speakers who have presented during the meetings have included:

- **MEAM** – COVID-19 period research findings
- **Collective Voice** – Moving parts: What might the future hold for drug and alcohol treatment & recovery policy?
- **Solihull Integrated Addiction Service** – Recovery Orientated Systems of Care and the Lived Experience Recovery Organisation (LERO)
- **Phoenix Futures** – The role of residential treatment in our treatment systems
- **NHS APA** – Inpatient detox
- **Warren Larkin Associates** – “An ounce of prevention is better than a pound of cure...”: Why more of the same won’t work. The urgent case for systems change

The programmes for these meetings are available as an appendix to this report.

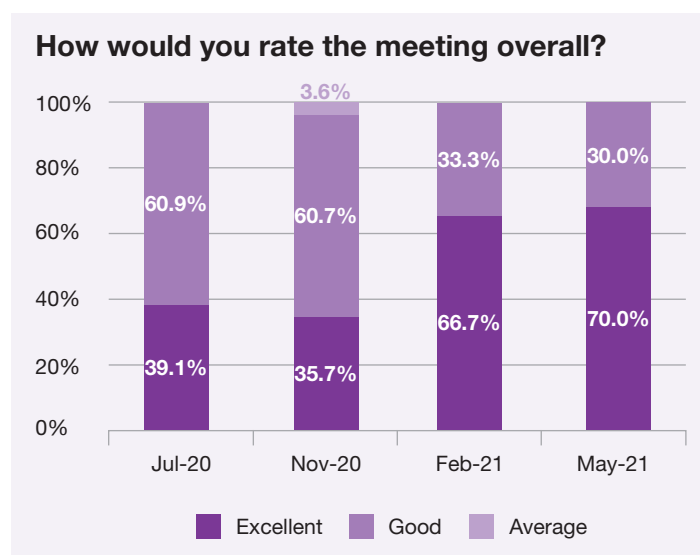
Attendance

Attendance at the online Full Group Meetings has been consistent over the last year: 52 members dialled in to the first meeting (July 2020); followed by 53 attendees (November 2020); 63 attendees (February 2021) and 55 attendees (May 2021). At each meeting, members have attended from across all nine regions (East Midlands, East of England, London, North East, North West, South East, South West, West Midlands and Yorkshire & Humber). This has been significant engagement considering the pressures members (many of whom sit in local authority public health teams) have faced during the pandemic.

Feedback

Following each national meeting, feedback has been captured from ESUCG members using SurveyMonkey. Evaluation responses have varied between meetings, with 10 responses being the lowest and 28 the highest number.

Overall rating

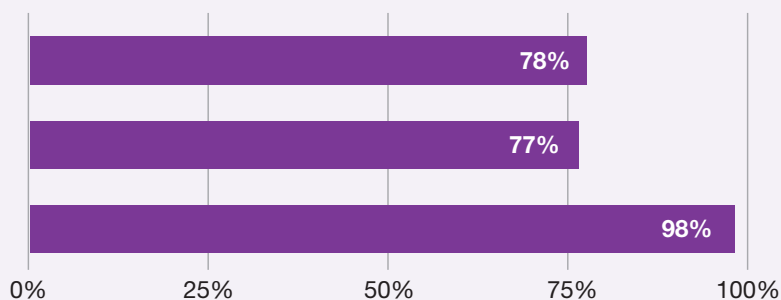


Facilitating learning, good practice and networking

Participants were asked to what extent they agreed with the following statements as a result of attending an ESUCG meeting:

To what extent do you agree with the following?

- As a result of the meeting, I can see new ways to develop and improve my commissioning practice
- I have shared information and advice and/or made links with peers
- I received important information relevant to my work



Quotes

What will you do differently as a result of the meeting?

Additional comments about the meetings:

“Will use the information from the residential rehab discussion to inform future commissioning.”

“Always informative, well chaired and topics of interest.”

“Embed learning into practice, share info with local colleagues.”

“An excellent mechanism to connect with fellow commissioners from across the country - absolutely invaluable.”

“Value of sharing good practice and networking nationally. I will prioritise these meeting in the future.”

“Always useful to hear from other areas and approaches to tackling challenges within the sector.”

“Support the joint response to Carol Black review. Consider priorities to feed in - and support development of these with the group where possible.”

“Forum for sharing and learning - particularly critical for me as no one else works on substance use across the Council - good opportunity to develop my thinking and hear about work beyond London!”

“Share thoughts and materials to K-Hub.”

“Really fab event - good chance to talk to those of equal mindsets and history.”

7. Online Forum

The ESUCG Knowledge Hub forum was set up in July 2020 to provide a closed online platform for commissioners to share resources, discuss their local experiences and offer peer support to one another. One year on (July 2021), the ESUCG forum has 102 active members.

More recently, documents relating to group meetings, governance and other related resources have been uploaded to the forum library. A total of 35 documents are up on the library and have been downloaded 207 times by members.

Knowledge Hub allows ESUCG members to post discussion threads which can then be commented on by other members. This has provided the opportunity for good practice, local learning and resources to be shared between commissioners across the country. A total of 52 forum threads have been posted to date.

8. Working Groups

The members of the ESUCG Steering Group, based on learning about members' local priorities, established working groups to explore and take forward work on the following areas:

Good Practice in Commissioning

A sub-group of the overall membership has met to look at this agenda, especially performance management and outcomes.

It was agreed the group would look at the following issues:

- To develop an agreed definition of Commissioning
- To identify examples of effective guidance and good practice currently exist
- Collate relevant tools and support and look to develop a "How to" guide/resource (building on things like JSNA packs etc)
- Explore opportunities and resources for training and development in commissioning (as it specifically relates to this agenda)
- Audit commissioning capacity, experience and competence nationally in relation to this agenda

The agenda of developing commissioning standards is now a focus of a national group being convened by PHE/DHSC to which the ESUCG has been asked to contribute. Much of the work proposed at the initial meeting will be influenced by the outcome of this national workstream. The proposed audit will support much of the implementation and development required to implement the standards so will be delivered after the summer.

Workforce Development

A further sub-group was established around workforce, with the aim of improving the attractiveness of the sector and supporting career development. Consensus was reached on the need to support the workforce development agenda and to achieve whole sector backing.

The group met and developed a 'straw model' – a competency based, modular, digital portfolio, which would be transferable and complement in-house training as well as academic accreditation.

A joint session with Collective Voice, NHS APA and SMMGP was held and the group explored how to learn from nursing, social work and public health more broadly.

Opportunities to feed into national activity around workforce development emerged in the summer of 2021, which the ESUCG are actively contributing to.

Tier 4: Inpatient Detox and Residential Rehabilitation

Since forming, the Tier 4 sub-group has conducted a survey of commissioners to identify trends and themes in residential rehabilitation services. They have worked through different views and arrangements on Tier 4 across local authorities/governments.

The sub-group's aims include:

- To develop a standard commissioning specification for residential rehabilitation services
- Share best practice around Tier 4 frameworks
- Engage with specialist providers and representatives to develop best mutual understanding of the agenda
- Consider funding in a rapidly changing environment

Meetings have been held between the sub-group and Rehab Online as well as rehab providers, which provided an opportunity to share the commissioner perspective on the advertised publicly available information for people who want to go to rehab. The sub-group have also met with Collective Voice and Tier 4 provider representatives.

Criminal Justice

A sub-group of the overall membership was convened to take a first look at what needed addressing or discussing in relation to Criminal Justice issues as they relate to drugs and alcohol. Terms of Reference in outline were agreed with the detail to be sorted virtually.

The function of the group was agreed as an opportunity to explore and develop best practice and guidance and to develop support products for the wider commissioning network.

It was also felt the group could:

- Provide opportunities to link to national and regional networks
- Look to explore and share opportunities as they relate to the wider CJ environment

Further meetings to be arranged for the new financial year although due simply to capacity issues work stalled at the end of the financial year to be recommenced after the summer.

Multiple and Complex Needs

A sub-group mobilised to look at multiple disadvantage and complex needs. Discussions have been had around:

- Trauma-informed practise and the workforce
- Safeguarding to promote change
- Homicide Reviews
- Outreach
- A&E, complexity & frequent flyers
- What good looks like
- Co-production
- Stratification
- Self-confidence & resilience
- DSE
- Public perspectives
- Orange Book Guidance
- COVID learning and gains
- Welsh study on Buvidal with this group
- Speakers and organisations that would support the work stream (MEAM/Blue Light/Michael Preston/Shoot)

The sub-group identified its priority actions as being:

- To develop a resource library on Knowledge Hub
- To develop a standardised commissioning guide
- To use Dame Carol Black's second review recommendations on complex needs to encourage and advocate for workstream development

Drug and Alcohol-Related Deaths

A sixth priority area for the ESUCG was identified as being substance-related deaths, and a sub-group was formed around this issue accordingly.

The sub-group came to a consensus on the following:

- To add value to the sector, not repeat other reports
- Include alcohol, though note that the numbers in any local area are difficult to manage in current systems
- Aim to influence nationally

After discussion, the sub-group agreed that the following question is specific to the commissioning perspective: Are our local systems set up to reduce alcohol and drug related deaths?

The proposed focus based on this consensus was to produce something along the lines of the Local Drug Information Systems report by PHE, which would be based on local commissioner discussion and conference, leading to a synthesis of good practice. It was agreed that any such product would need to factor in prevention, near miss and learning from deaths. As part of this work, a need was identified to survey members to find out what local systems are doing.

The group established links with Collective Voice, NHS Addictions Provider Alliance, College of Lived Experience Recovery Organisations as well as PHE colleagues. The group are open to working in partnership with a variety of groups going forward but acknowledge that service user/expert voices are currently missing from the conversation.

9. Challenges

Along with successes, the ESUCG have also encountered challenges in setting up and running the group. These include:

- Ensuring fair regional representation across the country. Ways to tackle this include utilising existing regional networks to spread the word about the group and encourage engagement in regions with lower membership numbers.
- Developing a common ground to represent the commissioner membership proactively when required. Ensuring that any ‘collective voice’ of the group is representative can be challenging with a diverse group with differing local priorities and demographics. However, the ESUCG has consistently sought to consult members on priorities to take to the national level. The role of the Steering Group/Executive Committee is also to ensure that their regions’ concerns are heard and fed back to the national level.
- Developing a common ground across the sector to help drive positive change.
- The potential shift to face-to-face national meetings in the future or a hybrid mix of online and in-person events. There are benefits to both formats but also difficulties, particularly around costs and accessibility. The group continues to consider these options and consult with members and will likely trial a hybrid model in the future if the situation allows.

10. Looking ahead

As well as continuing to offer commissioners a safe forum and peer support space, the ESUCG is looking ahead at ways it can best amplify the local commissioning perspective in a system which is rapidly changing and undergoing pressures. The year ahead will provide many opportunities as well as risks, with much uncertainty and change ahead relating to funding as well as the reorganisation of the wider NHS/public health systems.

One of the ESUCG’s key aims over the next year will be to establish and develop a website and social media presence, to increase its visibility and credibility on a national level and ensure the commissioning voice is not lost through structural and system-level upheaval.

The feedback received during the ESUCG’s first year shows that the forum and function are welcomed by most if not all commissioners. With the development of workforce standards, commissioning standards and a renewed focus on the agenda nationally, the group is committed to continuing to provide a safe space for uninhibited discussion, opportunities to influence and lobby on behalf of commissioners and the chance to share and compare practice as it develops.

The ESUCG is looking forward to continuing to increase membership and promote fair representation across all regions of England as well as to facilitate opportunities for engagement and peer support between commissioners. The group also hopes to continue playing a key role in supporting the wider system against the backdrop of recovery from the pandemic, funding challenges and organisational changes. Above all, the overarching aim of the group will continue to be to improve the outcomes for those whose lives are impacted by problematic substance use.

The English Substance Use Commissioners’ Group November 2021