

## **Northlands Response to Alcohol and Drug Commissioning Framework for Northern Ireland: 2013-16**

Northlands broadly welcomes the Alcohol and Drugs Commissioning Framework 2013-16. However we also have a number concerns which we have outlined below.

### **Monitoring and Assessment of Tier 3 Interventions**

Northlands was disappointed to discover that within the Commissioning Framework there appears to be an uncritical acceptance of the view, expressed by NICE and others, that the vast majority of interventions for alcohol and drug problems can now be undertaken successfully at Tier 3. Northlands believes that, in a Northern Ireland context, such a position may be complacent. It certainly has not been earned by way of a frank and rigorous analysis of the effectiveness of Northern Ireland's Tier 3 services in themselves.

Throughout the document Northlands has noted that whilst there are continual reminders as to the need for Tier 4 interventions to be "evidence-based", the same demand is not being made of Tier 3 services, at least not as often or as emphatically. Northlands believes this attitude needs to change.

It will be argued of course that Northlands, as a Tier 4 provider, is prejudiced in this regard. In reply to this we would simply argue that since our beginnings we have run our own Non-residential (Tier 3) service and that our annual figures clearly reflect our view that *only a small percentage of people seeking help require residential treatment*: of the 600 people we see Non-residentially per year approximately 60 (10%) of these are referred to Residential treatment. Northlands believes therefore, along with many others in the Addictions field, that in many instances non-residential (Tier 3) treatment can prove to be an effective intervention.

We are concerned however that a growing emphasis on, and apparent preference for, Tier 3 interventions has led to an assumption that such interventions are effective *in all instances* and that this in turn has led to a lack of scrutiny as to their actual effectiveness, particularly in cases where severe dependency is conspicuously present.

At present there is little or no monitoring of the effectiveness of Tier 3 interventions within Northern Ireland.

Northlands has consistently argued that low intensity interventions such as Cognitive Behaviour Therapy ( the therapeutic tool of choice at Tier3 level) are unlikely to bring about the quite radical shift in attitudes and insight that the severely dependent person requires if they are to make a full and proper recovery.

There is substantial, albeit at this stage anecdotal, evidence to suggest that a “revolving door syndrome” has begun to develop within the Tier 3 system and that those who are severely dependent soon disengage.

Many people who have passed through the Northlands residential service first attended Community Addiction teams and have often expressed frustration at the response they received there: staff, they felt, were often inexperienced and equipped with little more than a textbook knowledge of alcohol and drug problems, and that it was only at Northlands, where they underwent more intensive treatment, that they were able, for the first time, to explore the magnitude of their alcohol/drug problem in a manner which meaningfully addressed the full extent of the psychosocial disruption and distress it had caused in their lives, particularly in regard to family life.

Similarly, Social Workers and other Health Care professionals have expressed to Northlands a sense of having little or no faith in the Tier 3 system in regard to certain situations. If one were to try to encapsulate in a phrase the basic thrust of these criticisms in regard to Tier 3, it would be that, in instances of severe dependency, “it doesn’t get at” the problem in the same way that the kind of intensive residential treatment provided at Northlands and elsewhere does.

Northlands believes, therefore, that there needs to be a stronger commitment built into the Commissioning Framework to the effect that there will be regular, on-going monitoring and assessment of the effectiveness of Tier 3 services and interventions, including a process whereby the views and concerns of service-users, families and Health Care professionals can be heard and addressed.

### **Increase in the number of people receiving treatment**

Northlands welcomes the Commissioning Framework commitment (p. 18 and elsewhere) to increasing by 60% the number of people in Northern Ireland receiving treatment for alcohol problems, so as to meet the NICE target of 1 in 6 per year.

However Northlands would also suggest that this increase in the number of people receiving treatment will place considerable strains on existing resources and that this could easily lead to a quantitative as opposed to qualitative interpretation of NICE guidelines; the development of a “tick-box” culture which places too much emphasis on the achievement of targets (numbers of people seen etc.) rather than paying attention to the nature and quality of the service being provided.

In order to guard against this danger, Northlands would suggest that as well as providing significant additional resources to meet with the increase in numbers of people receiving

treatment, there needs also to be a parallel commitment to on - going monitoring of the quality and effectiveness of treatment services.

### **Family Involvement in the treatment process**

Northlands warmly welcomes the Commissioning Framework commitment towards encouraging family involvement in the treatment process as recommended by NICE and others.

Northlands has made family involvement an integral part of its' Non-residential and Residential treatment programmes since its' beginnings and has gained considerable experience in this area. Family members are often deeply affected by the drinking and/or drug use of a person close to them; and will often have developed their own mental and physical problems as a result: stress, nervousness, anxiety, low self- esteem, depression etc.

In our view therefore it is important that family members are involved in the treatment process *in a way that is meaningful and helpful for them.*

Again, there is a danger that the pressures placed on existing resources as a result of the additional workload involved in working with families, could lead to a "tick box culture" which views very superficial contact with families as sufficient to the fulfilment of NICE guidelines and results in no real change for families in the sense of providing effective therapeutic interventions.

Northlands would suggest therefore that as well as providing significant additional resources to meet with the additional workload involved, there needs also to be on-going monitoring and assessment of the quality and effectiveness of work with families.

### **Service-user involvement**

Northlands believes that the aims and objectives outlined in respect of service users in section 3 of the Framework represent a bold and courageous endeavour to ensure that the service user is placed at the centre of concern. Carried forward as outlined, these aims and objectives would help to bring about a situation in which Northern Ireland's Alcohol and Drug services, rather than simply being designed and imposed from without, would be shaped and influenced in their development by the population which they serve.