



Brynawel House Alcohol and Drug Rehabilitation Centre.

Brynawel is a substance misuse service that offers a programme of residential rehabilitation treatment for people who are dependent on alcohol or other drugs who wish to achieve and maintain abstinence. Brynawel supports recovery, the approach through which an individual is enabled to move from dependency on alcohol or drug use towards an alcohol or drug free life.

The central concept of a recovery is the principle that people who are dependent on alcohol or drugs should receive interventions which do more than just reduce the immediate risks and harms of addiction. Instead, the goal should be to move from dependency, to a drug, or alcohol free life. A strength of the recovery model is that it emphasises the joint responsibility of both the service user and the service provider to work towards clear, shared goals.

Brynawel is a not for profit, charitable Third Sector organisation which provides a residential rehabilitation facility, regulated by the Care and Social Services Inspectorate Wales, to meet the needs of residential clients over a treatment period of sixteen weeks and is able to offer treatment and rehabilitation to more than sixty clients a year. It has a staff of twenty and delivers only evidence based therapeutic interventions to assist the service user to achieve and maintain recovery.

Placements at Brynawel are purchased on an individual case by case basis, for the most part, by local authority social service departments. Placement is made following a “community care” assessment. As Brynawel offers a service to all Welsh local authorities decisions relating to the needs of the service user with a dependency are subject to differing eligibility criteria and affected by inconsistent approaches between local authorities towards assessing need and managing the care of people with drug or alcohol dependency.

Wales needs to have eligibility criteria, assessment and care management arrangements in place that take account of the needs of people who are

dependent on drug and alcohol. There must be integrated care pathways between community services and residential rehabilitation services so that all services operate as effective components of drug and alcohol treatment systems. It is essential that service users are not losers in a post code lottery. Consequently we strongly endorse the intention to proscribe national eligibility criteria, and guidance for care management, which should be reinforced with a code of practice that mandates the mapping of integrated care pathways. Guidance issued by the Welsh Government should ensure that there are mapped care pathways to recovery for people who are dependent on alcohol and other drugs.

The Substance misuse treatment community has grown organically; the Third Sector pioneered its provision and remains a significant contributor to the delivery of recovery focused services. As such we welcome the commitment of the Welsh Government to the development of an integrated service. However, the Third Sector must be included in statute as partner agencies if in Wales we are to meet the challenge of substance misuse. Because of the relative importance of the third sector in delivering substance misuse services approaches to service planning involving the third sector could be first tested in substance misuse.

Feedback from clients in Wales is generally highly positive regarding their experiences in residential care. Of considerable concern has been the delays and obstacles encountered in gaining admission, and the widespread absence of appropriate support in the community on discharge. This points to the need to include services such as housing, education and training within planning arrangements. In addition protocols and memorandums of understanding need to be agreed with the United Kingdom government in relation to non-devolved functions. Enshrining their role in codes of practice would help ensure the commitment of services such as the criminal justice and welfare benefits systems would be recognised.

Is there a need for a Bill to provide for a single Act for Wales that brings together local authorities' and partners' duties and functions in relation to improving the well-being of people who need care and support and carers who need support? Please explain your answer.

The Third sector is a key partner in the delivery of both health care and social care to people with problematic substance misuse and the Bill should acknowledge this contribution, should place reciprocal duties on Local authorities and health boards and third sector organisations to cooperate to promote the wellbeing of people in need.

The Welsh Government should involve Third Sector organisation in drafting regulations and codes of practice and we would wish to offer a detailed response to the consultation on regulations and codes of practice.

Third sector services such as Brynawel are lean organisations, flexible and dynamic. Operating in a market environment they have to be responsive to the needs of those who use and those who purchase services and as such their participation as statutory partners in services planning would bring a new dimension and added value to the process.

We believe that key to the successful implementation of the Bill will be the development of all Wales assessment, access and eligibility criteria alongside the integration of health and social care provision. We welcome the commitment to establishing a national eligibility framework

Substance misuse services working at the interface of the social care and health care systems would offer an appropriate environment to field test and refine a national eligibility framework before its roll out to high volume

Brynawel's objective, working as we do to promote recovery, is consistent with the reablement approach to social care. It offers a route out of service dependency, has the potential of releasing and recycling resources and enhancing the sustainability of services. As such it has a similar role to play as early intervention and preventive services in the process of rebalancing service configuration.

We welcome the inclusion of a duty to promote new models of delivery; however this should learn from and build on the current good practice found in existing Third Sector service delivery models such as that offered by Brynawel.

Do you think the Bill, as drafted, delivers the stated objectives as set out in Chapter 3 of the Explanatory Memorandum? Please explain your answer.

The development and implementation of the eligibility framework, the outcomes framework and Codes of Practice will be critical to the he delivery of the objectives of the Bill.

These need to encompass such services a housing, education and training and take account of employment and welfare benefits services as well as the criminal justice system. Though statue is the foundation of change, the quality of ground level leadership is a crucial factor in achieving a cultural shift. Consequently we feel that there is need to establish leadership groups across Wales. There should be a named individual who will be accountable to Welsh ministers for ensuring the implementation of the Bill at ground level. To achieve a cross sector response to the challenges posed by the Bill those partners required to cooperate must include the Third Sector listed on the face of the Bill.

The Bill aims to enable local authorities, together with partners, to meet the challenges that face social services and to begin the process of change through a shared responsibility to promote the well-being of people. Do you feel that the Bill will enable the delivery of social services that are sustainable? Please explain your answer.

To achieve sustainability services should be directed to focus on the twin tracks of prevention, early intervention and recovery and reablement delivering only evidence based interventions. To achieve this goal Welsh ministers should use their powers to promote the integration of health and social care. In addition Codes of Practice should include the requirement on services to collaborate to develop and deliver integrated care pathways.

How will the Bill change existing social services provision and what impact will such changes have, if any?

The bill can be driver in the reorientation of social services provision towards prevention and early intervention, recovery and reablement. Such organisational change can be achieved. It is seen in the pioneering work of the Welsh Government's Integrated Family Support Service. However universalising such change will demand leadership of the highest calibre. The Bill also has the potential to ensure the delivery of evidence based interventions. This will again require leadership to achieve a cultural shift in social service provision from a managerial, process lead approach to that focussed on the delivery of psychological interventions by the front line to build resilience and support behavioural change. Such a shift will require a comprehensive education and training programme but offers the potential for the creation of world leading Welsh model of social service provision.

What are the potential barriers to implementing the provisions of the Bill (if any) and does the Bill take account of them?

A potential barrier, to implementing the Bill and delivering new ways of working would be the failure to make real the concept of "one workforce" Realising the concept would ensure equality of access to professional development, education and training irrespective of whether the workforce was employed in the statutory sector , the Third Sector or the private sector.

If the ambition contained in the Bill is to be realised the implications for the social care workforce will be profound with considerable resource implications. The need for workforce retraining will demand the creation of a new architecture to create structures and capacity to meet the training needed.

The Welsh Government has shown foresight in its response to the training needs associated with the delivery of its Integrated Family Supports Service. This response demonstrates that the task is achievable.

In your view does the Bill contain a reasonable balance between the powers on the face of the Bill and the powers conferred by Regulations? Please explain your answer.

No comments

What are your views on powers in the Bill for Welsh Ministers to make subordinate legislation (i.e. statutory instruments, including regulations, orders and directions)?

No comments

What are your views on the financial implications of the Bill?

We are of the view that both preventive and recovery focused services are essential to meet need. Both approaches should reduce dependency on services. Early intervention in families where there is parental substance misuse is intended to achieve better outcomes for both parent and child and reduce future demands for services. Similarly investment in recovery focussed services for people with drug or alcohol dependency should reduce future demand for health and social care resulting from chronic alcohol related health disorders.

However investment in these services will require a transfer of resources and could be the driver to reconconfiguring health and social care, integrating the management and the planning of services to achieve economies of scale and diverting freed resources to direct service delivery.

Other comments

8. Are there any other comments you wish to make about specific sections of the Bill?

No comments

