Re-commissioning of Adult Drug and Alcohol Treatment Service in Cambridgeshire

Summary of the GP survey findings

November 2017

BACKGROUND

Between July and October 2017, a range of consultations and surveys were undertaken by Cambridgeshire County Council / Public Health to inform the re-commissioning of the drug and alcohol treatment service.

This short paper is a summary of the main findings from the electronic surveys returned from GPs. There were 32 responses; 65% of these (n=21) were from GP partners. The remainder comprised of other salaried or locum GPs, one nurse, one manager and three ‘other’ that included street outreach and two project workers. Please note that this does not mean that 32 different practices responded - some practices sent responses from a number of staff.

We are very grateful for the comments given.

FINDINGS

Prevalence of drug and alcohol misuse in patients
Almost all responding GPs saw patients who asked for help with drug and alcohol problems.
- 69% regularly saw patients with problematic use of prescription medicines - this was a growing problematic group.
- 58% regularly saw patients with substance misuse and mental health issues.
- 56% regularly saw substance misuse patients with significant morbidity - 44% of GPs also saw this group occasionally.
- Older, frail patients with substance misuse issues were rarely seen.

View of the treatment service
Almost all GPs signposted or referred patients to the treatment service and GPs reported that they received good feedback about the treatment service from patients. They thought the access and proactive support good, with motivated key workers. Communication was clear and contact easy. However, they said the treatment service was not interested in prescription medication misuse. Lack of electronic communication hampered effective practice.

Shared care
Shared care was not something that many GPs wanted to offer. The main reasons were lack of time to train and lack of resources; they did not think they would see enough such patients to gain expertise. Those undertaking shared care reported that it was indeed time consuming although some GPs said it worked well.

When asked what type of patients they would be willing to offer shared care to, the vast majority - 90%, said only ‘straightforward’ patients. 62% were willing to treat shared care patients with co-morbidities, but only 32% said they would be willing to offer it to all their patients.

Support for GPs
Most GPs wanted more support from the treatment service, plus support from additional services such as mental health, housing, pharmacies, housing and social care. Better multi agency liaison, training and time was needed to increase understanding and confidence to work with substance misusers. They saw hub and spoke models with specialised GPs as an effective model of treatment.