#

OHID and NHS England’s Drug and Alcohol Treatment and Recovery Workforce Transformation Programme

Briefing #2

## Background

In February 2019, Professor Dame Carol Black was commissioned by the then Home Secretary to undertake a two-part [independent review of drugs](https://www.gov.uk/government/collections/independent-review-of-drugs-by-professor-dame-carol-black#part-1), which should include an up-to-date analysis of the problems created by drugs in England and a set of recommended policy solutions.

In December 2021, the Government responded to recommendations in Dame Carol’s review by publishing a new drug strategy, [*From harm to hope: A 10-year drugs plan to cut crime and save lives*](https://www.gov.uk/government/publications/from-harm-to-hope-a-10-year-drugs-plan-to-cut-crime-and-save-lives), together with significant new investment, including an additional £532m for drug and alcohol treatment and recovery services from 2022/23 to 2024/25.

In September 2022, the Office for Health Improvement and Disparities (OHID) and Health Education England (HEE) published the first [Drug and Alcohol Treatment and Recovery Workforce Transformation Programme briefing](https://healtheducationengland.sharepoint.com/sites/MHPe/Shared%20Documents/Forms/AllItems.aspx?id=%2Fsites%2FMHPe%2FShared%20Documents%2FDrugs%20and%20Alcohol%20External%20Comms%2FSeptember%202022%2FDrug%20and%20Alcohol%20Treatment%20and%20Recovery%20Workforce%20Briefing%20%2D%20Final%206%2E9%2E22%2Epdf&parent=%2Fsites%2FMHPe%2FShared%20Documents%2FDrugs%20and%20Alcohol%20External%20Comms%2FSeptember%202022&p=true&ga=1) to provide an overview of the new national Drug and Alcohol Treatment and Recovery Workforce Transformation Programme for 2022/25.

This second briefing is designed to update on programme progress and provide an overview of upcoming publications and projects.

## NHS England

On 1 April 2023, HEE, NHS England and NHS Digital merged to create a ‘new’ NHS England. The Drug and Alcohol Treatment and Recovery Workforce Transformation Programme is now part of NHS England’s new national Workforce, Training and Education (WT&E) directorate.

## The Drug and Alcohol Treatment and Recovery Workforce Transformation Programme

The Drug and Alcohol Treatment and Recovery Workforce Transformation Programme for 2022-2025 is a joint endeavour, bringing the skills and experience of OHID and NHS England together with expert input from the treatment and recovery sector and people with lived experience.

## 2022/23 Achievements

### Local Authority recruitment

In 2022/23, local authorities (LAs) received the first year of the Supplemental Substance Misuse Treatment and Recovery (SSMTR) grant. This additional investment is to support local authorities and their delivery partners in improving drug and alcohol treatment and recovery services. This includes the expansion and enhancement of the workforce.

In 22/23, LAs and their delivery partners exceeded the annual drug strategy expansion targets for recruitment of drug and alcohol workers, nurses, pharmacists, and social workers. Recruitment of psychologists, psychiatrists and medical workforce fell short of the 22/23 targets.

In February 2023, the Department of Health and Social Care [published the local allocations for 2023 to 2024](https://www.gov.uk/government/publications/extra-funding-for-drug-and-alcohol-treatment-2023-to-2025/additional-drug-and-alcohol-treatment-funding-allocations-2023-to-2024-and-2024-to-2025) of the SSMTR grant and indicative allocations for the following year. LAs have worked with OHID and their delivery partners to develop their 23/24 plans and grant agreements are in in place. LA plans show sustained expansion of the workforce with £18.2m planned investment specifically in workforce development and significant investment in recruitment including continued growth in drug and alcohol workers and regulated professionals[[1]](#footnote-2).

### Workforce planning guidance

In March 2023, [workforce planning guidance](https://healtheducationengland.sharepoint.com/%3Ap%3A/g/Comms/Digital/EX3i5z-rUG9PrQ48Z320ovcB1l0Usisn1QPuSSmuhAiMIw?e=kw2ZOr) was distributed to support LAs and their delivery partners in 2023/24 SSMTR grant planning. The guidance was developed following extensive sector engagement, including focus groups with staff and people with lived experience, one-to-one conversations with 67 staff and volunteers, and a survey completed by 476 frontline staff and volunteers.

The guidance pack provided key actions for LAs and delivery partners to consider in 2023/24 budgets and plans. It was intended to be used alongside the findings of the first ever national workforce census undertaken in 2022.

### Workforce census

In 2022, [NHS Benchmarking Network](https://www.nhsbenchmarking.nhs.uk/) (NHSBN) was commissioned to conduct a national census of the drug and alcohol treatment and recovery service workforce. This census took a snapshot of the workforce as of 30 June 2022. This is the first time this information has been gathered for this sector on this scale and subsequent reports are planned for 2023 and 2024 respectively.

The report analysed data across the following parts of the sector:

* LA-commissioned adult and young people’s treatment and recovery providers in the voluntary, NHS, LA (services directly delivered by the LA), and independent/private sectors
* LA commissioning workforce
* Lived experience recovery organisations (LEROs)

There were 535 data submissions across all 7 HEE regions, of which 347 were from treatment providers, 23 from LEROs and 165 from commissioners. Across all sectors 11,851 staff were reported, with the voluntary sector accounting for over three quarters of the LA-commissioned drug and alcohol treatment and recovery workforce.

More detailed findings can be found in the [Drug and Alcohol Treatment and Recovery Services National Workforce Census.](https://healtheducationengland.sharepoint.com/%3Ab%3A/g/Comms/Digital/EVNb0bzJM3FHqM0WeP-1GwMB3-CoXjkmDwgo_Ckau1L7Ug?e=Klw0OK) LAs also received LA-level reports and employers received service-level reports. These compare the LA-wide and service-level workforce to national findings.

The census findings are being used to inform national and local drug and alcohol treatment and recovery service workforce planning and delivery plans for 2023/24.

In 2023, NHS England has re-commissioned NHSBN to conduct a second [Drug and Alcohol Treatment and Recovery Services National Workforce Census](https://healtheducationengland.sharepoint.com/%3Ab%3A/g/Comms/Digital/EVNb0bzJM3FHqM0WeP-1GwMB3-CoXjkmDwgo_Ckau1L7Ug?e=Klw0OK) across the same parts of the sector as those covered in the 2022 census.

The 2023 census collection launched on 10th July 2023 and closed on 1 September 2023. Drop-in sessions, email support, videos and FAQs were available via the [project website](https://www.nhsbenchmarking.nhs.uk/drug-and-alcohol) during the data collection period to provide support and answer queries.

The national census findings will be published in early 2024. Providers that responded and LAs will receive reports comparing their data to national findings.

### Mental Health and Wellbeing Practitioner Training

In October 2022, HEE and OHID offered eligible drug and alcohol treatment and recovery service providers the opportunity to become early implementers and pilot the introduction of the Mental Health and Wellbeing Practitioner (MHWP) role into their services.

The MHWP role was developed to provide wellbeing-focused, psychologically informed interventions and coordinate care plans for adults with severe mental health problems in community mental health services.

The potential benefits of bringing MHWPs into drug and alcohol treatment and recovery services include:

* developing capacity and capability to treat common co-occurring mental health difficulties and thereby help people to:
	+ build the personal, social and community resources that are necessary to promote and sustain recovery such as stable housing and supportive social networks (also known as recovery capital)
	+ reduce their problem alcohol and drug use
* enabling segmentation of caseloads[[2]](#footnote-3) and clinical capacity to work with people with more complex needs
* increasing expertise that can be shared in teams working with individuals experiencing co-occurring mental health difficulties.
* supporting the development of integrated pathways with local mental health services by:
	+ providing a first step into mental health treatment
	+ supporting stabilisation in mental health and alcohol and drug use conditions.
	+ opening up access to more high-intensity treatment with specialist providers and improving referral pathways.
* supporting recruitment and retention by developing alternative training routes for staff who may not have the qualifications required to access other psychological professional training.

***“****As a Mental Health and Wellbeing Practitioner you can, as part of your team, make an important difference to people with mental health problems, offering psychologically informed interventions that they may have found hard to access before. You will also help to plan their wider care with them, so that they can receive the best possible services.”*

**Adrian Whittington, National Lead for Psychological Professions, NHS England**

LA-commissioned drug and alcohol treatment and recovery service providers in England were invited to make an expression of interest (EOI) to become an early implementer site in 2022/23 and in training places for 2023/24 cohorts.

A high number of EOIs were submitted by eligible services and 18 starters began their training in 2022/23 cohorts.

## 2023/24 programme activity

Two workforce programme products will be published in Autumn 2023. These are

* capability framework phase 1
* a strategic plan

### Capability framework

NHS England and OHID are developing a new capability framework for a range of sector roles in consultation with and guided by an expert advisory group with representation from sector leads, OHID and NHS England.

The framework will support the sector to plan, develop, and deploy their workforce and have been developed with reference to:

* national clinical guidelines on problem drug use and dependence and, the forthcoming alcohol treatment guidelines.
* National Institute for Health and Care Excellence (NICE) guidance on treatment and recovery interventions.
* the best evidence for prevention.
* an examination of the core skills of the workforce.

The framework identifies core capabilities across the sector and enables safer and more effective practice by:

* describing the skills, knowledge and behaviours required across the adult and young people’s drug and alcohol treatment and recovery workforce.
* providing capability statements for core unregulated roles in the sector (such as drug and alcohol workers).
* helping to standardise key capabilities across the sector to support consistency and quality of drug and alcohol treatment and recovery service provision.
* outlining the capability requirements for effective supervision.
* supporting training, education and research, and identifying career pathways and continuing professional development (CPD) for roles across the sector.
* aiding service providers and commissioners in assessing skills gaps.
* helping to inform the design and commissioning of a multi-disciplinary workforce, able to deliver evidence-based treatment and support.
* providing a firm foundation for future workforce development.

The new national drug and alcohol treatment and recovery capability framework is being developed in two phases with the first phase due to be published in Autumn 2023 and the second phase to follow in Spring 2024. NHS England has commissioned the [National Workforce Skills Development Unit](https://workforceskills.nhs.uk/) (NWSDU) to develop the framework.

Phase 1 is focused on the following roles:

* Drug and alcohol treatment workers.
* Children and young people’s drug and alcohol workers.
* Peer support workers.
* Adult and mental health nurses including those who are non-medical prescribers (NMPs).
* Addiction psychologists / psychologists including consultant, assistant, and practitioner psychologists.

Phase 2 will focus on the following roles:

* Commissioners.
* Senior drug and alcohol workers (exact role title TBC).
* Service leads.
* Family workers.
* Social workers.
* Counsellors.
* Medical workforce e.g., Addiction Psychiatrists and GPs.
* Pharmacists.

### Strategic plan

A ‘Strategic framework’ was developed last year, following sector-wide consultation. In February 2023, key recommendations from this draft strategic framework were shared with the sector to inform the 2023/24 workforce planning cycle.

The key elements of this early development work are now being incorporated into a comprehensive 10-year strategic plan for the drug and alcohol treatment and recovery workforce.

This plan will bring together the workforce transformation programme workstreams and resources and support the drug and alcohol sector to implement them. It will provide a framework to create and sustain a motivated, and highly trained workforce able to meet the treatment and recovery needs of people who use(d) drugs and/or alcohol.

The publication of the strategic plan in Autumn 2023 will mark the end of the first phase of the workforce transformation programme.

### Multidisciplinary Team Workforce calculator

A new multidisciplinary team (MDT) workforce calculator tool is being developed by NHS England and OHID to support LA drug and alcohol treatment and recovery commissioners, as well as service providers, to better understand the current and future workforce numbers and skill mix required to meet local population needs.

The workforce calculator will identify the MDT workforce required in the local treatment system at an LA level, rather than necessarily applying at an individual service level. In those cases where an individual service employs the entire MDT for an LA area, the calculator will apply to that individual service.

The calculator will be used as a guidance tool to start the conversation at a local level about the skill mix, MDT size for each LA and additional support roles required in the MDT to improve the quality of care. The tool will enable areas to identify what the WTE requirements in line with any local plans to increase numbers in treatment.

Publication date of the calculator tbc.

### Role specific workforce advisory groups

Two workforce advisory groups have been established:

* Psychological professions
* Psychiatry

The following groups are due to be established in 2024:

* Nursing
* Drug and alcohol workers
* Social workers
* Peer support workers.

These role-specific advisory groups will bring together a network of representatives from the drug and alcohol treatment and recovery sector with experience and expertise in the roles. These groups will provide advice and scrutiny to the key activities in and decisions about the role they represent and will cover the Workforce transformation programme’s four key areas of workforce development. These areas are:

1. Recruitment and retention
2. Training and skills development
3. Career progression
4. Supervision and support with a focus on clinical supervision

### Psychological professions training and education

A range of training and education opportunities designed to enhance the psychosocial skills of the workforce are also in the pipeline: These include:

* 23/24 cohort of MHWPs
* Dialectical Behaviour Therapy
* Cognitive Behavioural Therapy (CBT) for personality disorder

#### 2023/24 Mental Health and Wellbeing Practitioner cohort

In 22/23, service providers submitted 99 expressions of interest (EOIs) for MHWP training places on the 2023/24 cohorts. NHS England regional leads are currently liaising with service provider leads in their region to scope demand for and confirm MHWP training places for the Winter 24 cohorts. Information will be circulated to service leads once the process has been agreed. Services should keep their respective OHID regional lead, and the national NHS England programme team updated on progress with these training places once they have been confirmed.

#### Psychological therapies for severe mental health problems

In January 2023, NHS England launched a national survey seeking the views of psychological professionals working within the drug and alcohol treatment and recovery sector on the preferred training options for Psychological Therapies for Severe Mental Health Problems (PTSMHP)within the sector. The survey was promoted via the Psychological Professions Group, jointly established by OHID and HEE. It ran from January 2023 to February 2023.

The survey asked psychological professionals to rank nine [PTSMHP training courses](https://www.hee.nhs.uk/our-work/mental-health/psychological-therapies-severe-mental-health-problems) currently commissioned by NHS England from high to low, based on which course would be of most benefit in a drug and alcohol treatment and recovery setting. Nineteen psychological professionals from the sector, working in both NHS and 3rd sector organisations, responded.

The top two training course preferences ranked by respondents were:

1. Dialectical Behaviour Therapy (DBT)
2. Cognitive Behavioural Therapy (CBT) for personality disorder

##### Dialectical Behaviour Therapy (DBT)

NHS England has identified the potential capacity on this NHS England commissioned training programme for 23/24 starters, working closely with OHID and NHS England regional colleagues. A briefing was cascaded in August 23 seeking EOIs by early September. Recruitment is underway throughout September with the course due to start in October 2023.

##### Cognitive Behavioural Therapy (CBT) for personality disorder

NHS England is currently working closely with OHID and NHS England regional colleagues to agree the CBT for personality disorder approach for 2024/25 training programmes. A briefing pack will follow to the sector when this approach is confirmed.

## Websites

* [NHS England Drug and alcohol treatment and recovery workforce transformation programme](https://www.hee.nhs.uk/our-work/mental-health/drug-alcohol-treatment-recovery-workforce-programme)
* [NHS Benchmarking Network (NHSBN) drug and alcohol treatment and recovery workforce census](https://www.nhsbenchmarking.nhs.uk/drug-and-alcohol)
* [Health Education England (HEE)](https://www.hee.nhs.uk/)
* [Office for Health Improvement and Disparities (OHID) Alcohol and drug misuse prevention and treatment guidance](https://www.gov.uk/government/collections/alcohol-and-drug-misuse-prevention-and-treatment-guidance)

## Contact

* If you have any queries, would like to get involved, or if you would like to be removed from the mailing list then please write to us at england.wte.mentalhealth@nhs.net
* If you are responsible for training in your organisation and would like to receive information about the workforce transformation programme and training opportunities, please complete this [form](https://forms.office.com/Pages/ResponsePage.aspx?id=K5Gn_5ewMUGcD9DoB1Wyq5q9FyK6TplNgg_6NhgkwnVUNTA3R1ZNVjEzVEdORERVNERDVU9SNlAwSC4u).
1. Regulated workforce

As defined in the [Professional Qualifications Act 2022](https://www.gov.uk/government/publications/professional-qualifications-act-2022-guidance-for-regulators/professional-qualifications-act-2022-guidance-duties-on-regulators-to-provide-information-to-regulators-in-another-part-of-the-uk-section-9) the regulated workforce refers to roles that require an essential level of training for registration with a professional body to be able to fulfil the role.

Unregulated workforce

The unregulated workforce are people who, at the time of writing, do not need to have an essential professional qualification and registration with a governing body for the purpose of their role. [↑](#footnote-ref-2)
2. Segmentation and caseload management of psychosocial interventions: The variation between and within individuals over time, their differing social circumstances and the different configuration of services suggest that a ‘one-size fits all’ model for delivering psychosocial interventions is unlikely to be effective or practical. A flexible response for efficient treatment delivery may involve services segmenting their treatment population into recipients of different care packages. These may range from a low-intensity offer for service users not requiring or not wanting more involvement, to intensive recovery-focused packages of treatment for service users motivated to make changes. It may involve periods of more intensive support provided for service users in crisis or for others at times of increased need (such as around pregnancy and delivery). Ongoing review of treatment benefit, and if necessary adjustment to support changes within the care plan, is still necessary however treatment is organised. [Drug misuse and dependence: UK guidelines on clinical management - GOV.UK (www.gov.uk)](https://www.gov.uk/government/publications/drug-misuse-and-dependence-uk-guidelines-on-clinical-management) [↑](#footnote-ref-3)