**Dear (INSERT NAME OF YOUR MP HERE. IF YOU DO NOT KNOW THE NAME OF YOUR MP YOU CAN FIND IT** [**HERE**](https://www.ceoemail.com/uk-mp.php) **ALONG WITH THEIR EMAIL ADDRESS),**

I am writing to you to inform you of an issue that is causing particular harm to constituents in your area in the hope that you will lend your support to this issue. Last year, in your constituency there were too many drug related deaths. Indeed, nationally we have seen the largest ever recorded numbers of drug related deaths.

The most vulnerable alcohol and substance misusers are those with multiple and complex needs including mental and physical health problems. It is these people that often need specialist medical treatment in an inpatient detoxification unit in order to successfully help them on the road to recovery from their addictions. These NHS Inpatient Detoxification Units largely sit outside the local community drug treatment services commissioned by local authorities **which is the very reason that they are disappearing at a rate of one per year.**

**There are currently only 5 NHS Inpatient Detox units operating in the entirety of the UK** [(SEE MAP TO YOUR NEAREST UNIT)](https://nhssapa.org/ipn), which equates to less than 100 beds nationally, none of which are located in the South of England. All of these units are forced to operate on a commercial model where local authorities pay per bed. As such, all the remaining units are facing financial difficulties meaning that they are perilously close to closing. The result of this is that **some of the most vulnerable patients that the NHS supports are either unable to access treatment or have to travel long distances away from their support systems in order to access a bed.**

I am deeply concerned about this issue and I believe that if the gradual erosion of these units continues then many more of the most vulnerable people will not be able to access adequate treatment.

This is why I am asking for your support to help secure the future of the limited Inpatient Detoxification Units currently left in the UK. Here is how you can easily support this issue:

1. Add your name to the petition that is on the NHS Addictions Provider Alliance's website ( The NHS Addictions Provider Alliance are the group leading the campaign to save the IPU’s).
2. Please raise awareness of this issue amongst your parliamentary peers by raising questions in relevant parliamentary sessions and working groups that you are involved in. Please could you make us aware of any sessions that you do intend to ask questions in so that we can support you to do so and publicise the question and its responses.
3. We believe that this should be an issue that is considered by the parliamentary Health and Social Care Select Committee. As such, we are asking you to email (hsccom@parliament.uk) the Health and Social Care Select Committee asking for the issue to be raised as a matter of urgency (Please copy into this email).
4. Make representation directly to NHS England asking them to include Inpatient Detoxification Units as a specialised service within their commissioning arrangements. You can do so by emailing NHS England england.boffice\_speccom@nhs.net
5. Please support us to increase awareness of this issue on social media by using the Twitter hashtag **#KeepTheFewNHSIPUs** and following the NHS Addictions Provider Alliance [@NHS\_APA](https://twitter.com/NHS_APA).

The NHS Addictions Provider Alliance is fully committed to supporting you with any of the actions above. We have provided a short information document that further explains the issues summarised above which can be found as an appendix to this letter. You can also read a detailed Business Case regarding the need for NHS England specialised commissioning, as well as patient stories about inpatient detox on our website [https://www.nhsapa.org/ipn](https://www.nhsapa.org/)

Kind Regards,

ENTER YOUR NAME AND CONTACT DETAILS HERE

**APPENDIX A:**

**In-patient Drug And Alcohol Detoxification Units: Background, Threats And Opportunities**

**A Statement From The NHS Addictions Providers Alliance**

**Background**

Anyone can develop a serious drug and alcohol problem. The effects can be devastating for those concerned, their families and friends, their physical and mental health and society at large. Drug and alcohol problems are both common and treatable on the one hand, but can be fatal if untreated.

For instance:.

* In England there are an estimated 586,780 dependent drinkers. Only 18% are receiving treatment;
* Latest figures estimate that alcohol costs the NHS around £3.5 billion each year;
* In the UK in 2018 there were 7,551 alcohol-specific deaths;
* Alcohol misuse is the biggest risk factor for death, ill-health and disability among 15-49 year-olds in the UK, and the fifth biggest risk factor across all ages. Hospital admissions and deaths from alcohol related liver disease such as cirrhosis are rising rapidly. Many people admitted to hospital with alcohol related liver disease did not know that they had liver disease and the prognosis is poor, with 20% dying in hospital.
* The Covid 19 pandemic has worsened these already alarming statistics. A recent report indicated that the death rate of cirrhotic patients admitted to hospital with Covid-19 was 36%

**The Provision Of In Patient Detoxification Services In England.**

Many serious addiction problems require management on an in-patient basis, especially for those with severe alcohol dependence. Withdrawal from alcohol is unpleasant at best, and can lead to fatal problems. Safe detoxification involves trained addictions nurses, doctors and psychologists. Many alcohol dependent people have other serious medical needs and need psychological help to cope with the issues that lead them to abuse substances in the first place, especially childhood trauma and PTSD.

Most people are therefore surprised to hear that there are only five NHS detox units in England for individuals with severe drug and alcohol dependence. Most of these are at risk of closure, due to rising costs and falling funding. Although every £1 spent on drug and alcohol treatment saves £3 in other costs, access to treatment for drug and alcohol treatment is difficult. Access to inpatient alcohol detoxification treatment has fallen by 50% in recent years despite rising need, source: <https://www.bbc.co.uk/news/education-49126495>

**How Has This Situation Arisen?**

In 2013, the Health and Social Care Act transferred responsibility for commissioning substance misuse services from primary care trusts to local authorities. Local authorities’ commission detoxification provided in residential alcohol and drug treatment services typically on a spot-purchase basis. This is a change from when units were funded by the NHS on a block contract basis, usually for a specific area. Funding cuts have fallen heavily on inpatient detoxification services, especially those in the NHS, with some areas have very little or no Tier 4 [residential] treatment budget. NHS detox facilities are mostly in the strange situation of providing complex medical care to patients without NHS funding.

There are now fewer than 100 NHS detoxification beds in England, and less than 25 in the southern half of the country. **London and Birmingham for instance have no NHS inpatient detoxification services** and only one non-NHS service each. Some non-NHS in patient detoxification services responded by trying to provide a cheaper service than that provided by the NHS. However many of those have been closed by regulators due to poor care e.g. due to lack of trained staff or timely management of withdrawal symptoms.

Covid 19 has had a dramatic effect on this limited provision. Many units have been shut due to being used as covid-specific facilities, or not being seen as essential services with staff being redeployed elsewhere. Those remaining units have run at reduced capacity, admitting only patients who otherwise would be in general hospitals. Their costs have escalated. It is far unclear when provision will return to normal. Covid 19 has put local authority budgets under significant budgets with the potential for further reductions in funding for addictions treatment.

**What Are The Consequences Of The Current Situation?**

The transfer of funding of medical in patient detox treatment to the current system of local authority spot funding has had a number of unintended consequences.

* With such limited provision service often have to travel long distances to receive treatment, something frowned upon in other areas of care. It can be difficult for referring professionals, family and other carers to visit and means that some service users never arrive.
* Waiting lists are long and many patients admitted to detox have suffered permanent disabilities by the time they are admitted. The reduced funding and access to treatment has merely shifted costs to other services (i.e. A&E and mental health services), as well as associated with an increase in drug and alcohol related deaths.
* The spot funding of patients by local authorities can lead to distorted clinical priorities. One of the most concerning and immediate consequences to the change in provision of drug and alcohol treatment is that addiction care is not seen as a desirable career path The Royal College of Psychiatrists has noted a significant reduction in the numbers of consultant addiction psychiatrists and of trainees. NHS inpatient detoxification and stabilisation provision provides a rich training ground for trainee doctors and consultants.

**What Are The Remedies?**

It cannot be over emphasised that in-patient detoxification units, especially in the NHS, provide complex **medical** interventions to their patients. Staff have a **specific skill set** that involves addictions care, pharmacology, general medicine, psychiatry, nursing care for wounds, managing the frail patient, nutrition etc., as well as social care.

The NHS Addictions Providers Alliance believes that it is both humane and cost effective to set up a national and nationally funded, inpatient detoxification service under the auspices of NHS England. We are requesting that the remaining Inpatient Detoxification Units should be commissioned and funded directly by NHS England as a specialised service in the same way that other acute inpatient treatment services are funded (i.e. Perinatal Mental Health Units). The funding requirements to safeguard the existing NHS detoxification units is small with a total running cost of £7.1 m.

The need is now **urgent,** to prevent closure of the existing unit, **safeguard desperately needed training places** and allow for the transfer of more patients attending general hospital to receive the urgent addictions specific care they need.

The NHS Addictions Provider Alliance has produced a business case to be submitted to the NHS England. We call on you to support this business case.

**Want to Know More?**

A wide range of information can be found on the NHS Addictions Provider Alliance’s website [https://www.nhsapa.org/ipn](https://www.nhsapa.org/) which includes a detailed business case and service user stories. You can also contact us <https://www.nhsapa.org/contact-us>

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