

'Payment by results' for drug misuse treatment gets mixed reception

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Credit: University of Manchester

A team of University of Manchester academics has published an evaluation of the impact of the Government's pilot Payment By Results scheme for drug misuse treatment – giving it a mixed reception.

The scheme was introduced in eight pilot areas in 2012, in which Local Authorities tested the new approach to commissioning drug and alcohol misuse [treatment](#).

The system provides financial incentives to treatment services to improve their performance.

The results of the impact evaluation for drug misuse treatment, funded by the NIHR Policy Research Programme, are published today in the journal *Addiction*.

The Manchester impact evaluation was based on analysis of all drug misuse treatment that was provided in England between 2010 and 2014 and included over 300,000 spells of treatment.

The study compared key outcomes in the areas that tried the Payment by Results approach with outcomes in the areas that did not.

The proportion of service users who successfully completed drug misuse treatment (within twelve months of its inception) went down in pilot areas, from 34% to 24%, but increased from 27% to 29% in the other areas.

The proportion of people who reported no use of illicit substances or alcohol while they stayed in treatment increased in pilot areas, from 22% to 27%, but decreased very slightly, from 23% to 22%, in the other areas.

"Overall, the findings are something of a mixed bag" said Dr Andrew Jones, the study coordinator and lead author from The University of Manchester.

"One of the key outcomes that we looked at was whether service users completed drug misuse treatment successfully.

"Performance in the Payment by Results areas was actually worse than in the areas that continued with business as usual.

"However, the [areas](#) that tested the new approach did slightly better in terms of service users avoiding [illicit substances](#) or alcohol, while staying in treatment."

Traditionally, drugs and alcohol treatment agencies have been paid on the basis of the number of people they treated.

However, under the new approach they are paid on the basis of a set of key outcomes, such as the numbers completing their treatment free from substance dependence and reductions in crime.

The scheme is an example of a wider government move to paying on the basis of results.

The evaluation considered a range of additional outcomes that might have been influenced by the introduction of the incentive scheme, such as drug related mortality and involvement in crime, but was not able to find any impact on these.

Dr Tim Millar, who led the impact evaluation said: "Drug treatment services already work extremely hard to improve the lives of service users who often have problems that are extraordinarily complex and deeply entrenched.

"Perhaps it shouldn't come as a great surprise that we did not find clear cut evidence that the scheme produced the benefits that were intended".

The Manchester study is part of a wider, multi-strand, study, undertaken in collaboration with RAND Europe, User Voice, and The Institute for Criminal Policy Research at Birkbeck, University of London.

The report is based on independent research commissioned and funded by the NIHR Policy Research Programme (Evaluation of the Drugs

Recovery Payment by Results Programme of Piloting).

"Does paying [service](#) providers by results improve recovery outcomes for [drug](#) misusers in treatment in England?" is available in the journal *Addiction*.

More information: Andrew Jones et al. Does paying service providers by results improve recovery outcomes for drug misusers in treatment in England?, *Addiction* (2017). [DOI: 10.1111/add.13960](https://doi.org/10.1111/add.13960)

Provided by University of Manchester

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