RECOMMENDATION

1. That the Cabinet Member for Public Health, Parks and Leisure approves the extension of grant award for the Insight substance misuse treatment service with Blenheim CDP for the period between 1 January 2017 and 31 March 2017.

2. That the Cabinet Member for Public Health, Parks and Leisure notes the intention to re-commission the young people’s substance misuse service with the intention for new service provision to commence delivery in 2017/18 financial year as part of the overall transformation of the drug and alcohol treatment system in Southwark.

BACKGROUND INFORMATION

3. The Health and Social Care Act 2012 set out the introduction of a statutory duty for all upper tier local authorities to take appropriate steps to improve and protect the health of people in their locality including individuals with drug and alcohol misuse.

4. On 1 April 2013, by virtue of two statutory transfer schemes signed by the Secretary of State for Health, a number of public health staff and services transferred from Southwark Primary Care Trust (PCT), which was then abolished, to Southwark Council.

5. Prior to the public health statutory transfer on 1 April 2013, Southwark Council had previously awarded a contract to BCDP to deliver the Young People’s Substance Misuse Service (Insight Southwark) for a period of 3 years commencing in April 2010 at an annual estimated contract value of £460,000. A Gateway 2 report recommending the original award of contract was agreed by the Strategic Director of Environment and Housing on 9 March 2010. A contract extension was granted in early 2013 for 11 months, lasting until 31 March 2014 and approved by way of a Gateway 3 report on 12 June 2013.

6. An IDM report dated 28 February 2014 sought approval to extend the contract to BCDP for the Young People’s Substance Misuse Service for a further 6 months commencing on 1 April 2014 and ending on 30 September 2014. This was to align the dates of service delivery with the 12 month grants awarded to substance misuse providers which commenced on 1 October 2013. Approval was granted by the then Cabinet Member for Finance, Resources and Community Safety. The young people’s substance misuse service contracting arrangements was converted to grant funded agreement in alignment with the services that transferred from Southwark PCT.
7. Between September 2013 and the present day, a number of IDM reports have sought and been granted approval to extend service provision to a number of substance misuse treatment services including the existing provider of the young people’s substance misuse service as outlined in table 1 below:

<table>
<thead>
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<th>Decision</th>
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<th>Date of Decision</th>
<th>Approver</th>
</tr>
</thead>
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<td>IDM - Provision of grant awards to drug &amp; alcohol treatment providers</td>
<td>1 October 2013 – 30 September 2014</td>
<td>September 2013</td>
<td>Cabinet Member for Finance, Resources &amp; Community Safety</td>
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<tr>
<td>IDM – Extension of grant awards to drug &amp; alcohol treatment providers</td>
<td>1 October 2014 – 31 March 2015</td>
<td>September 2014</td>
<td>Cabinet Member for Environment, Recycling, Community Safety &amp; Volunteering</td>
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<tr>
<td>IDM – Extension of grant awards to drug &amp; alcohol treatment providers</td>
<td>1 April 2015 – 31 March 2016</td>
<td>March 2015</td>
<td>Cabinet Member for Public Health, Parks &amp; Leisure</td>
</tr>
<tr>
<td>IDM – Extension of grant awards to drug &amp; alcohol treatment providers</td>
<td>1 April 2016 – 31 December 2016</td>
<td>March 2016</td>
<td>Cabinet Member for Public Health, Parks &amp; Leisure</td>
</tr>
</tbody>
</table>

Table 1: History of grant awards approval for substance misuse services in Southwark 2013-2016

8. Approval for extension to the existing grant arrangements was agreed in order to ensure no disruption in access to drug and/or alcohol treatment provision for some of the borough’s most vulnerable young people by creating a ‘steady-state’ of delivery enabling the Drug and Alcohol Action Team (DAAT) to undertake a borough-wide review of the local drug & alcohol treatment system to inform future commissioning intentions.
9. Following the commencement of the borough-wide review of the treatment system in 2014, a Gateway One (GW1) report dated February 2015 sought approval for the procurement of an Adult Integrated Drug and Alcohol Treatment System for Southwark with approval granted at the Cabinet meeting of 10 February 2015. Young people’s substance misuse treatment provision detailed in this report was outside of the scope of this procurement.

KEY ISSUES FOR CONSIDERATION

10. Whilst it is not mandatory under primary or secondary legislation for the council to provide the type of drug and alcohol treatment service detailed in this report, a new condition is attached to the Public Health grant for 2015/16 which states ‘local authorities should seek to improve the take up of and outcomes from drug and alcohol treatment services’.

11. Commissioners consider it essential that the existing service continues to be provided without a detrimental impact on vulnerable service users, their families and communities for whom there could be serious negative consequences if service provision was to cease on 31 December 2016.

12. The majority of individuals accessing drug and alcohol treatment services have complex needs and multiple vulnerabilities including physical and mental health issues, involvement with the Criminal Justice system, safeguarding, social exclusion and impaired social functioning. Continued engagement with drug and alcohol treatment service provision is essential to help reduce escalating costs being incurred by other council departments and health services. Engagement with effective drug and alcohol treatment services helps prevent premature death, the transmission of blood borne viruses and overall deterioration of health and wellbeing. The emotional and financial costs associated with anti-social and criminal behaviour can be prevented by effective substance misuse treatment.

13. The benefits of investment in the provision of effective drug and alcohol treatment has been researched and demonstrated through clinical trials, government and private funded research. The publication ‘Making the case for public health interventions’ produced by the King’s Fund and Local Government Association identified the following level of return on investment:

- every £1 invested in drug treatment in Southwark saves society £2.50 in reduced health and social care costs and reduced crime.
- every £1 invested in motivational interviewing and developing supportive networks for people with drug and alcohol issues returns £5 to the public sector in reduced health, social care and criminal justice costs.

14. Effective substance misuse treatment also impacts on cross council priorities and the successful delivery of the Southwark Council Plan 2014 – 2018 in relation to the following Fairer Future promises:

- Best start in life – offering intensive specialist support for parental drug and alcohol users to address dependency improves the life chances of their children and reduces the likelihood of harm with decreased impact on Children’s Social Care services
Healthy active lives – tackling dependency and associated ill-health helps to reduce health inequalities and support people to improve their lives with contribution on a wide range of Public Health Outcomes Framework (PHOF) indicators.

Cleaner, greener, safer – engagement of drug and alcohol users in effective treatment reduces substance related crime and antisocial behaviour as well as reducing the discarding of drug related paraphernalia in public places

Strong local economy – achieving stability in treatment and sustained recovery enables drug and alcohol users to find work, access training and achieve their goals as well as contributing to the local economy

15. Annual joint strategic needs assessment support packs are provided by Public Health England (PHE) which demonstrates current and projected drug and alcohol treatment needs in Southwark focusing on adult drug and alcohol and young people’s profiles. An updated Young People’s drug and alcohol needs assessment is currently being drafted and will be used to inform commissioning decision in line with Southwark’s Joint Health and Wellbeing Strategy and the Childrens’ and Young People’s strategic commissioning framework.

16. The scope of the service provision detailed in this report solely relates to the Insight Southwark Young People’s Substance Misuse Service provided by Blenheim CDP.

17. The adult integrated drug and alcohol treatment system contract is not commissioned to deliver the service provision detailed in this report but the service is considered an essential component of a balanced and effective treatment system in order to meet the drug and alcohol treatment needs of young people. The Council can best continue the current service provision by extension of grant award which will allow the procurement of a new service contract to comply with EU procurement regulation timescales and to ensure no disruption in continuity for vulnerable residents.

18. Whilst it is desirable to change the basis upon how this grant funded service is commissioned at the earliest opportunity, there is also a need to appropriately scope options and undertake procurement to ensure that future arrangements deliver cost efficiencies, best value for money and improve outcomes for service users. The proposal to extend the grant award for a further period of three months is intended as a short term interim arrangement.

19. A comprehensive contract and performance management framework is in place for drug and alcohol treatment service provision resourced by DAAT officers with all providers required to attend formal contract reviews on a quarterly basis. All providers are required to be registered with the National Drug Treatment Monitoring system (NDTMS) and to provide accurate treatment data to the Department of Health. All NDTMS data is collated and analysed with regular performance reports that are reviewed by the DAAT and presented to relevant boards.

20. Young People’s drug and alcohol treatment is monitored in accordance with activity and a range of nationally recognised outcomes linked to successful completion of treatment.
21. Core monitoring arrangements under grant will remain the same throughout the extension period with a renewed focus on the use of innovation within service delivery in order to meet presenting need and evidence positive outcomes for service users.

Policy implications

22. The Health and Social Care Act 2012 set out the introduction of a statutory duty for all upper tier local authorities to take appropriate steps to improve and protect the health of people in their locality. A new condition attached to the Public Health grant was included from 2015/16 which outlines a specific requirement for local authorities to 'have regard to the need to improve the take up of, and outcomes from, its drug and alcohol misuse treatment services.'

23. Local authorities are guided by their local joint strategic needs assessment and joint health and wellbeing strategy, and the objectives within the national Public Health Outcomes Framework (PHOF). The extension of grant awards requested in this report is in accordance with the council's public health commissioning responsibilities and Southwark Council's Joint Health and Wellbeing Strategy.

24. Proposals within this report are in line with the key national policy drivers and legislation for drug and alcohol treatment in England including the National Drug Strategy 2010 and the HM Government 'Every Child Matters' framework for England and Wales which was launched in 2003 and which underpins the Children's Act 2004.

Community & equality impact statement

25. The joint strategic needs assessment identified the current and projected needs for substance misuse treatment in Southwark. Due to referral processes and the specialist nature of service provision there is currently no detrimental impact to any of the protected characteristics identified within the Equality Act 2010 as considered within the Public Sector Equality Duty.

26. Based on the most recent unrestricted PHE substance misuse Joint Strategic Needs Assessment (2014/15) and other available data, it is evident that there is a significant need to provide services to both adult and young people who are residents of Southwark that address drug and alcohol misuse issues. The proposals within this report will ensure that individuals, families and communities affected by substance misuse in the borough have access to and receive the appropriate level of support at the time that it is needed. Changing the basis upon which services are commissioned during the period of grant extension will ensure that the overall treatment system is able to successfully deliver in this regard.

27. The grant award within this report has been subject to a 15% reduction in funding when compared with Q4 of the 2015/16 financial year. The current provider has been fully consulted and prepared an impact assessment which was utilised to underpin the decision-making process. The DAAT will work closely with the provider to ensure that impact on frontline service delivery is minimised.
Financial implications

28. The extension of grant award for the named substance misuse treatment provider is to be funded from a combination of resources – Public Health Grant & MOPAC grant. All funding contributions are confirmed for 2016/17.

29. The DAAT team have negotiated a 15% reduction in the extended grant for the final quarter of 2016-17, from £91,411 to £77,670. The extended award will be jointly funded by the MOPAC grant and by Public Health. The money from Public Health will be funded by in-year savings already achieved by other DAAT services for 2016-17.

Legal implications

30. Please refer to supplementary advice from the Director of Law & Democracy.

Consultation

31. The involvement of communities is a key part of service development of all parts of the health system including drug and alcohol treatment. The value of considering the wider views of individuals and communities is critical to facilitating understanding and tackling health and wellbeing issues in the borough. Engagement with the community and with individuals accessing commissioned services is a core principle of the DAAT's commissioning strategy. The impact of services on the community, and the views of the local community about these services, continues to be a core element of the review work of the services described within this report and will continue to be an integral element of service development and monitoring arrangements.

32. Opportunities have been taken to source information from service users, families, partner agencies and stakeholders to support the design and development of service provision. An example in practice includes information gained from pupils participating in the schools peer education programme which has been utilised to inform methods of service delivery.

SUPPLEMENTARY ADVICE FROM OTHER OFFICERS

Director of Law and Democracy

33. This report seeks approval of the award of further grant funding to BCDP for substance misuse treatment services for a period of three months from 1 January 2017. Paragraph 28 confirms the sources of funding.

34. The decision to approve the recommendation for grant funding is one which is expressly reserved to the Cabinet Member under Part 3D of the council Constitution. The report sets out the proposals and justification for the grant award. The Cabinet Member’s attention is drawn to the Public Sector Equality Duty (PSED) under the Equality Act 2010, and when making decisions to have regard to the need to eliminate discrimination, harassment, victimisation or other prohibited conduct, and to advance equality of opportunity and foster good relations between persons who share a relevant protected characteristic and those who do not share it. The relevant characteristics are age, disability, gender reassignment, pregnancy and maternity, race, relation, religion or belief, sex and sexual orientation. The duty also applies to marriage and civil
partnership but only in relation to the elimination of discrimination. The Cabinet Member is specifically referred to the community impact statement at paragraphs 25-27 and consultation requirements at paragraphs 30-31, setting out the consideration that has been given to equalities issues and consultation undertaken, which should be considered when approving this further grant funding, and particularly in approving the reduction of funding being made available.

35. Officers consider that these services should be regulated by way of conditions of grant funding rather than by more formal commercial contractual conditions. The terms of the funding agreements with the existing service providers will continue to apply for the period of extension and allow the council to withhold or “claw back” funding if necessary in the event that the required services and service delivery outcomes are not achieved.

36. The report notes that future service provision is likely to be subject to formal procurement processes underpinned by the requirements of EU and domestic legislation and the council’s Contract Standing Orders and officers should seek advice from the director of law and democracy at the appropriate time.

Strategic Director of Finance and Governance (16DK1617)

37. The Strategic Director of Finance and Governance notes the extension of the DAAT services listed in this report to the end of 2016-17, and the 15% reduction negotiated for this 3 month period that is to be funded by the Public Health and MOPAC grants for 2016-17. It is also noted that new treatment services will be commissioned over the next few months with the intention for new service provision to commence delivery in 2017-18.

BACKGROUND PAPERS

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<tr>
<th>Background Papers</th>
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<tr>
<td>Approval and Award of Grants to Substance Misuse Treatment Service Providers</td>
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Extension of grant awards to substance misuse treatment providers


APPENDICES

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<td>Appendix 1</td>
<td>Challenges in measuring impact of substance misuse services</td>
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## AUDIT TRAIL

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<thead>
<tr>
<th>Lead Officer</th>
<th>Jin Lim, Interim Director of Public Health</th>
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<tbody>
<tr>
<td>Report Author</td>
<td>Donna Timms, DAAT Unit Manager, Community Safety &amp; Partnerships Service</td>
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<tr>
<td>Version</td>
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<tr>
<td>Dated</td>
<td>1 December 2016</td>
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### CONSULTATION WITH OTHER OFFICERS / DIRECTORATES / CABINET MEMBER

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<tr>
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<th>Comments included</th>
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