

Item No.	Classification: Open	Date: 8 July 2022	Meeting Name: Strategic Director of Environment and Leisure
Report title:		Gateway 3 – Variation Decision Adult Integrated Drug and Alcohol Treatment System (AIDATS)	
Ward(s) or groups affected:		All wards; people with drug and / or alcohol support needs, their families and children	
From:		Director of Public Health	

RECOMMENDATION(S)

That the Strategic Director of Environment and Leisure:

1. approves a variation of the AIDATS contract with Change, Grow, Live Services Limited (CGLSL) to extend the contract for a maximum period of two months commencing on 1 February 2023 and to invest additional funding to enhance existing service provision up to a maximum contract value of £975,299.
2. notes that the following funding awards are included in the maximum contract value detailed in paragraph 1:
 - i. up to a maximum of £600,000, which represents a two month extension of the substantive AIDATS contract funded by the Public Health grant between 1 February and 31 March 2023;
 - ii. up to a maximum of £375,299 which has arisen from the inclusion of the new Section 31 local authority Supplementary Substance Misuse Treatment and Recovery Grant (SSMTRG) funded projects as a requirement of contractual delivery for a period of 12 months between 1 April 2022 and 31 March 2023.
3. notes that a Gateway (GW) 3 report dated 24 February 2022, which was approved by the Cabinet Member for Health and Wellbeing on 31 March 2022, made provision for the continuation of funding of a dedicated Criminal Justice Team with CGLSL, originally commissioned under the Section 31 local authority Universal Drug Treatment Grant in 2021-22, for the period between 1 July 2022 and 31 January 2023 and that the financial value allocated to this project for the stated period from the SSMTRG is not included in this GW3 report as already approved.
4. notes that the council is currently undertaking an application process for additional funding from the Rough Sleeping Drug and Alcohol Treatment Grant (RSDATG) to expand the project further and that this will be the subject of a further GW3 report once the outcome is known.

BACKGROUND INFORMATION

5. On 6 December 2021, the UK government published a new Drug Strategy 'From harm to hope: A ten year drugs plan to cut crime and save lives'. This outlined a number of commitments including an intention to ensure that local areas maintain their existing investment in drug and alcohol treatment in 2022-23 and beyond and the announcement of significant new investment over the three year spending review between 2022-23 and 2024-25 to support local authorities to boost their local treatment system provision in line with the recommendations made in the Part Two Review of Drugs.
6. In February 2022, the council received informal notification of financial allocations under the new Supplementary Substance Misuse Treatment and Recovery Grant (SSMTRG), which local authorities must use to address the aims of the treatment and recovery section of the UK Government's 2021 Drug Strategy.
7. On a national basis, by the end of 2024-25 the additional funding should deliver:
 - 54,500 new high-quality treatment places, including: 21,000 new places for opiate and crack cocaine users; a treatment place for every offender with an addiction; 30,000 new treatment places for non-opiate users and alcohol users; a further 5,000 more young people in treatment
 - 24,000 more people in long-term recovery from substance dependence
 - 800 more medical, mental health and other professionals
 - 950 additional drug and alcohol and criminal justice workers
 - adequate commissioning and co-ordinator capacity in every local authority
8. Local authorities will realise the programme aims by working with their local partners to achieve the following outcomes:
 - reduced likelihood of drug and alcohol related deaths
 - a reduction in drug and alcohol related reoffending amongst prolific offenders within local areas
 - increase in the numbers of drug and alcohol users, especially offenders, engaging in treatment as well as increases in those achieving and sustaining recovery
 - reduce costs for local health services and police forces due to lower health and crime harms, and lower costs to the criminal justice system (as fewer people are dealt with by the courts).
9. Southwark was identified to become an enhanced area in the first funding tranche from 1 April 2022, which reflects our position as one of 50 local authorities with the highest levels of drug-related harm and need. Tranche 1 areas will see a significant increase in funding allocation across the three year spending review period to support local delivery in line with Dame Carol

Black's vision for a world class treatment and recovery system. The additional funding is dependent upon maintaining existing 2020-21 investment levels.

10. On 14 April 2022, the council received formal notification of Southwark's SSMTRG allocations from the Office for Health Improvement and Disparities (OHID) and was provided with a four week period to develop a planning proposal. This included detailing a three year programme of quantitative and qualitative ambitions against a suite of pre-determined measures set by the government and developing a three year outline plan for the borough that underpins our local longer-term vision to increase treatment capacity and quality, to expand the local drug and alcohol workforce, to reduce drug-related deaths and improve access to physical and mental health care, and to build a recovery-oriented system of care.
11. As part of this process, the council was also required to develop a detailed expenditure plan for 2022-23, setting out proposals for allocation of Year 1 funding totalling £848,212 across ten key outcome areas¹. Resources, including staffing posts, were proposed for allocation following consultation with stakeholders and utilising local intelligence and needs assessment. Southwark received approval of its initial proposal on 14 June 2022 and will be required to resubmit subsequent proposals for approval throughout 2022-23 should reallocation be necessary in the event of accrued underspend.
12. Detailed information about the AIDATS service is provided in a GW3 report dated 24 February 2022. The AIDATS represents the council's largest commissioned drug and alcohol treatment provision, with the service providing community-based care and support to over 90% of people engaged in treatment in the borough.
13. In line with the aims, objectives and outcomes of the SSMTRG, a significant proportion of the funding allocation for 2022-23 has been proposed for commitment to the AIDATS contract, to be delivered by its provider CGLSL, and represents an enhancement of current provision through building staffing capacity and skill mix and investing in drug and / or alcohol related interventions that are unaffordable through existing budgets. This will be formally implemented through the variation of contract detailed in this GW3 report.
14. As noted in paragraph 3, some SSMTRG has already been formally committed in a previous GW3 report dated 24 February 2022 and is not included in this report as already approved prior.
15. The council is also currently undertaking an application process to secure additional funding from the RSDATG to enhance and expand project delivery between 2022 and 2024. This process has not yet concluded and as such, a

¹ System coordination and commissioning, Enhanced harm reduction provision, Increased treatment capacity, Increased integration and care pathways between criminal justice settings and drug treatment, Enhancing treatment quality, Residential rehabilitation and inpatient detoxification, Better and more integrated responses to physical and mental health issues, Enhanced recovery support, Other interventions, Expanding the competency and size of the workforce.

further GW3 report will be progressed to commit additional funding to the AIDATS contract in 2022-23 once the outcome is known.

KEY ISSUES FOR CONSIDERATION

Key Aspects of Proposed Variation

16. The first variation within this report pertains to a two month extension of the AIDATS contract to align the service end date with the SSMTRG Year 1 delivery period of 2022-23. This will include the scope of the service specification for the council's substantive AIDATS contract in addition to creating the ability to award funding for Year 1 SSMTRG projects commissioned through the service contract in totality.
17. The second variation pertains to the commitment of additional SSMTRG investment to the AIDATS contract to enhance drug and alcohol treatment provision in the borough in 2022-23 by increasing staffing capacity and skill mix and investing in drug and / or alcohol specific interventions that are considered to be an integral part of a treatment system.
18. Performance measures associated with the deployment of the SSMTRG are different to the substantive contract's Key Performance Indicators. Committing this new investment to the AIDATS contract will require the refreshed measures to be included as a condition of the variation.
19. The maximum financial value of both variations is detailed in the financial implications section of this GW3 report.
20. SSMTRG funding is ring-fenced for expenditure within the 2022-23 financial year with no carryover permitted and any underspend is required to be returned to the government. The urgency to re-profile underspend in a rapid timely manner so as to ensure that funding can be deployed as quickly as possible to interventions that reduce and prevent substance related death, reduce harm and inequalities and improve outcomes for Southwark residents and not be returned to the government gives rise to an immediate need for decision-making at a local level.
21. As such, interventions and projects may be subject to re-profiling at short notice throughout the financial year. Whilst re-profiling of services may happen in line with the menu of interventions, this will take place within the financial envelope detailed in this report as approved by the Strategic Director of Environment and Leisure.
22. Any re-profiling of the grant in 2022-23 shall be jointly agreed between the Unit Manager – Drug and Alcohol Action Team (DAAT) and the responsible Consultant in Public Health and this shall be communicated to the new 'Combating Drugs Partnership' that will shortly be stood up.

Reasons for the variation

23. The reasons for this variation are as detailed in paragraphs 16 and 17.

24. The Public Contracts Regulations (PCR) 2015 (which remain substantially in force following Brexit) permit modifications to existing contracts of this nature without the need for a fresh procurement exercise in certain limited circumstances and this is confirmed within the concurrent report of the Director of Law and Governance.

Future Proposals for this Service

25. A GW 1 report, approved by cabinet on 7 December 2021, outlined an intention to procure a new all-age service contract in 2022. The publication of the new Drug Strategy and a commitment to significant UK government investment in local treatment systems necessitated a pause to the planned procurement whilst the implications of the same were explored.

26. Since December 2021, this has proven to be a rapidly evolving picture with new implications arising throughout the six month period that have required significant engagement with legal and senior officers to work through. The development of a planning proposal, including detailed planning for 2022-23, has taken up a significant amount of officer and provider resource and following approval from OHID, there is a requirement to ensure compliance with the council's Contract Standing Orders (CSOs) and Finance Standing Orders (FSOs) in order to formally commit funding to a range of different organisations and projects.

27. Whilst the council remains committed to commissioning an all-age service contract, there is also a need to ensure stability of the existing treatment system for people with drug and / or alcohol support needs and those affected by the substance misuse of another person whilst SSMTRG funded projects and services are implemented. Additionally, the new Provider Selection Regime, which will govern the future procurement of this category of services, is anticipated to commence on 1 August 2022 and this has significant implications for the planned procurement.

28. As such, officers will work with legal and procurement colleagues throughout the summer of 2022 to establish a preferred direction of travel and this will be taken forwards in line with CSOs thereafter.

Alternative Options Considered

29. **Cease to commission the service on 31 January 2022 when the current contract ends and with no additional services included:** The substantive service is funded from the Public Health grant allocation with a condition attached to the payment of the grant. The contract detailed in this report represent the council's major vehicle for meeting this condition.

30. The contract represents the only adult community specialist drug and alcohol treatment service provision in the borough and is the primary vehicle for reducing demand for drugs and / or alcohol and preventing and reducing drug

related death. Loss of access to treatment would result in significant risk to health and wellbeing and in some cases to life for some of the borough's most vulnerable residents and a breach of the council's statutory duties.

31. Additionally, not committing the new investment from the SSMTRG to the service contract would severely detrimentally impact upon Southwark's ability to meet the aims, objectives and outcomes of the Drug Strategy and would result in sustained harms and health inequalities for the resident population.
32. **Cease to commission the service on 31 January 2022 when the current contract ends and with the additional services included:** whilst inclusion of the additional investment would help to meet the aims, objectives and outcomes of the Drug Strategy, this would not align with the Year 1 funding and monitoring period and would end with the same negative outcome outlined in paragraph 31.
33. **Deliver a procurement with new arrangements to be in place by 1 February or 1 April 2023:** Paragraphs 25 to 28 outline the position in relation to re-procurement of the services. At this time, a clear direction of travel is unable to be confirmed for factors out of the council's influence. In line with the aims, objectives and outcomes sought through the grant and Drug Strategy, a significant percentage of the SSMTRG will need to be allocated to community drug and alcohol services across the three year funding period. This new investment was not included in the GW1 report approved by cabinet on 7 December 2021 and is not formally committed for allocation in line with CSOs.
34. As the timescales do not allow for a procurement of this scale, size and level of risk to be undertaken, a further GW3 report recommending an extension of the AIDATS contract beyond 1 April 2023 will be required to ensure continuity of service provision. The parameters of a further variation, including extension period, requires further consideration and there is an urgent need to formally commit SSMTRG funding for 2022-23 to CGLSL to stand up projects as a high priority. As soon as the implications of all influencing factors are determinable, a GW3 report will be developed and progressed recommending a future direction of travel.
35. **Extend the current contract for a further period of two months with no additional services included:** whilst this would ensure service continuity of the substantive contract, the ability to meet the aims, objectives and outcomes of the grant and Drug Strategy would be unachievable.
36. **Extend the current contract for a further period of two months with additional services included:** this is the preferred option as the contract extension will enable an alignment with the SSMTRG Year 1 funding period and the implementation of drug and alcohol specific additional projects and services throughout 2022-23 will support the effective delivery of the aims, objectives and outcomes of the Drug Strategy and will help to reduce drug and alcohol related harm and inequalities in Southwark's communities.

37. **NB. Alternative options for SSMTRG allocation:** The additional investment allocated to the AIDATS contract aligns with local need and is reflective of interventions hosted by a community drug and alcohol treatment provider. The overall proposal also includes other organisations in Southwark that interface with people with these support needs and the council could have selected different interventions from the menu of interventions that would have resulted in a different financial allocation to that proposed in this report.
38. Southwark’s proposal was developed utilising annual commissioning support packs, needs assessment, local data, intelligence and knowledge and discussions with a wide range of stakeholders in order to align investment with interventions that will effectively target need and reduce harm and inequalities. OHID’s approval confirms that our proposed allocations are in line with UK government expectations for the deployment of the grant. There is an opportunity in Years 2 and 3 to amend and increase investment across the treatment system and this will be formally committed at a later date in line with the government’s schedule (to be confirmed).

Identified risks for the Variation

39. Identified risks are set out in the table below.

Risk	Risk level	Mitigation
Inability to progress a procurement at this time resulting in the need for a further extension	High	Paragraphs 25 to 28 detail the complex, rapidly evolving context within which this service contract operates. Paragraph 34 outlines the need to progress this GW3 report in order to formally commit funding for 2022-23 projects and that a further GW3 report will be necessary later in 2022-23 to ensure service continuity from 1 April 2023. This situation has arisen as a result of the Drug Strategy investment and could not have been anticipated by the council prior.
Risk of legal challenge due to offering an extension beyond the original contractual term and / or including new drug and / or alcohol	Low	The need for this further extension has arisen as a direct consequence of the UK government’s Drug Strategy commitment to significant new investment in drug and

specific projects and services		alcohol treatment, which was published in December 2021, the implications of which continue to evolve. Regulation 72 (1)(c) will be relied upon.
Non-compliance with performance measures during the period of extension	Low	Proposed performance measures include a range of National Drug Treatment Monitoring System (NDTMS) and locally recorded indicators allowing for different gauges of service effectiveness and performance. Performance is monitored on a minimum monthly basis and as part of formal quarterly contract review. The provider has performance action plans in place to drive improvement and attainment.
Issues arising from Brexit impacting on service delivery or procurement process	Low	Brexit impact is unlikely with medicine supply chains all based in the UK (AIDATS). Procurement related changes will be monitored by the council and officers will take any advice and requirements into account.

Policy framework implications

40. The policy framework implications are outlined in paragraphs 73 to 76 of a GW3 report dated 24 February 2022.

Contract management and monitoring

41. The DAAT located in the Communities division of the council will maintain lead commissioner responsibility for the management and monitoring of the contracts, working under delegated authority from the Director of Public Health. This is primarily achieved through formal quarterly contract review meetings, aligned with the National Drug Treatment Monitoring System data schedule, in addition to day-to-day contact to fulfil the purpose of monitoring

oversight and a proactive approach to service development. No changes to these processes are proposed.

42. Formal quarterly contract review meetings take the format of contract monitoring reports and meetings with provider representatives. The provider is required to submit comprehensive technical and financial information to the council ahead of the formal review, which is scrutinised with clarifications dealt with prior to the review. Collaborative working is promoted, although the risk lies with the provider.
43. Where areas of performance concern are evident, which could suggest service user needs are not being met, the providers are directed to deliver an enhanced focus on improvement and this is regularly reviewed by officers with robust action plans in place.
44. In order to comply with the terms and conditions of the SSMTRG, consideration is being given to the format of additional monitoring and reporting oversight in relation to projects and resources funded through this programme.
45. Governance for the contract is provided through the Community Safety Partnership. The UK government has recently communicated its requirements in relation to the formation of local Combating Drugs Partnerships (including alcohol) within existing structures and this partnership will be responsible for oversight of all three strands of the national Drug Strategy including treatment and recovery.

Community, equalities (including socio-economic) and health impacts

Community impact statement

46. Please refer to paragraphs 82 to 92 of a GW3 report dated 24 February 2022 for detailed information.
47. The additional investment provided through the SSMTRG to boost drug and alcohol treatment provision through the AIDATS service will support CGLSL to build capacity to increase the number of people in treatment, including those with complex needs, and thus, to reduce the harms and inequalities that arise from unmet drug and / or alcohol support need.

Equalities (including socio-economic) impact statement

48. Please refer to paragraphs 97 to 104 of a GW3 report dated 24 February 2022 for detailed information.
49. Additionally, in developing the proposals for additional services to be delivered by CGLSL from the SSMTRG, officers utilised a wealth of data and intelligence including needs assessments and equality impact assessments (EQIAs) to identify areas of investment that will impact on reducing

inequalities and help to improve outcomes for many of the borough's most vulnerable residents.

Health impact statement

50. Please refer to paragraphs 112 to 116 in a GW3 report dated 24 February 2022 for detailed information.
51. One of the key outcomes of the use of the SSMTRG is to reduce and prevent drug and / or alcohol related death and this will be a key focus of the upcoming three year drug and alcohol treatment and recovery work programme. Additionally, the council has opted to invest in additional resources to deliver better and more integrated responses to physical and mental health this year through the recruitment of additional workers and interventions.

Climate change implications

52. Please refer to paragraphs 119 to 121 in a GW3 report dated 24 February 2022

Social Value considerations

53. The Public Services (Social Value) Act 2012 requires that the council considers, before commencing a procurement process, how wider social, economic and environmental benefits that may improve the well being of the local area can be secured. The social value considerations included in the tender (as outlined in the GW 1 report) are set out in the following paragraphs in relation to the tender responses, evaluation and commitments to be delivered under the proposed contract.

Economic considerations

54. Please refer to paragraphs 123 to 125 in a GW3 report dated 24 February 2022.

Social considerations

55. Please refer to paragraphs 131 to 138 in a GW3 report dated 24 February 2022.
56. The SSMTRG has been awarded, in part, to support local areas to increase treatment capacity and to engage more people with services in order to reduce unmet need and associated harms and inequalities.
57. The initial proposal includes a Parents' and Children's Lead post that will be recruited to support the implementation of a whole family approach to treatment. The post-holder will be co-located with Children's Social Care and will support the team to identify children affected by substance related harm and parents with drug and / or alcohol support needs and ensure that they are referred to CGLSL's support services.

Environmental/Sustainability considerations

58. Please refer to paragraphs 145 to 147 in a GW3 report dated 24 February 2022.

Financial Implications

59. A maximum contract value of up to £975,299 is proposed as outlined in the table below. With reference to the SSMTRG, CGLSL will only receive reimbursement for services delivered during 2022-23 in line with the terms and conditions of grant.

Funded Activities	Funding period	Maximum funding	Funding stream	Payment Schedule	Payment Basis
AIDATS contract	1 February – 31 March 2023	£600,000	Public Health grant	Monthly in arrears	Fixed
Additional and expanded provision arising from new investment	1 April 2022 - 31 March 2023 (in line with project schedule)	£375,299	SSMTRG	Quarterly in arrears	Variable
Total		£975,299			

60. In line with a GW3 report dated 10 April 2019, CGLSL will continue to recoup VAT and reinvest a proportion into local service delivery.

Legal Implications

61. Please refer to the concurrent by the Director of Law and Governance.

Consultation

62. Recent feedback from service users is detailed in a GW3 report dated 24 February 2022.

63. In line with the SSMTRG guidance, Southwark's proposal was developed in consultation with a range of partners and stakeholders including CGLSL, Recovery Support Service (lived experience and peer mentoring), Adult Social Care, Children's Social Care, Criminal Justice agencies including the police and probation services, and health.

Other implications or issues

64. N/A

SUPPLEMENTARY ADVICE FROM OTHER OFFICERS

Strategic Director of Finance and Governance (FIN1312 - JB)

65. The report requests approval for a 2 month extension to the existing AIDATS contract with CGLSL from February 2023 and approval for additional funded projects as a result of the inclusion of SSMTRG funding within the contract.
66. Paragraph 1 notes the maximum contract value is £975,299 and is funded from the existing Public Health grant and the recently confirmed SSMTRG funding value from OHID as noted in paragraph 11.
67. The table at paragraph 59 provides details of funding sources, payment schedules and the basis of payment. This notes that payments for SSMTRG projects are variable as opposed to the fixed payments for the existing contract.

Head of Procurement

68. This report seeks the approval of the Strategic Director of Environment and Leisure for a variation of the AIDATS contract with Change, Grow, Live Services Limited (CGLSL) to extend the contract for a maximum period of two months commencing on 1 February 2023 and to invest additional funding to enhance existing service provision up to a maximum contract value of £975,299.
69. The report also seeks that the breakdown of this value is noted as set out in recommendation 2, as well as that an existing variation to the contract, under a separate GW3 was approved in February 2022 in relation to this contract as detailed in recommendation 3.
70. Recommendation 4 also seeks that the Strategic Director notes that the council is currently undertaking an application process for additional funding from the Rough Sleeping Drug and Alcohol Treatment Grant (RSDATG) to further expand the project and that this will be the subject of a further GW3 report once the outcome is known.
71. The report details in paragraphs 16-22 the key issues to be considered in relation to the proposed variation that set included in paragraphs 23 and 24. The Future Proposal for the service is laid out in paragraphs 25-28.
72. The community, equalities, health and climate change impact statements in relation to the contract are set out in paragraphs 46-52 of the report.

Director of Law and Governance

73. This report seeks approval of an extension of an existing contract with Change, Grow, Live Services Limited together with investment of additional funding for the provision of the adult integrated drug and alcohol treatment

service, for a maximum period of two months from 1 February 2023 and for the reasons stated in paragraphs 16 and 17.

74. The estimated value of the proposed contract extension is above the advertising threshold for “light touch” services of this nature as defined in the Public Contracts Regulations 2015 (PCR) and the contracts do not contain express provision for extension beyond their original term. This means that a fresh procurement exercise is required unless it is possible to satisfy one or more of certain limited permitted grounds for “modification” under the PCR.

75. Regulation 72 (1) (c) permits modifications in cases where all of the following conditions are fulfilled:-

- the need for modification has been brought about by circumstances which a diligent contracting authority could not have foreseen;
- the modification does not alter the overall nature of the contract;
- any increase in price does not exceed 50% of the value of the original contract.

Where this ground is relied upon the council must also publish a modification notice on the UK Find-a-Tender service.

76. The proposed variation of this contract is consistent with domestic procurement and equalities legislation and the council’s Contract Standing Orders, which reserve the decision to approve the recommendations in this report to the Strategic Director of Environment and Leisure, following consideration of the report by the Departmental Contract Review Board.

Director of Exchequer (for housing contracts only)

77. N/A

Director of Education (for schools contracts only)

78. N/A

PART A – TO BE COMPLETED FOR ALL DELEGATED DECISIONS

Under the powers delegated to me in accordance with the council’s Contract Standing Orders, I authorise action in accordance with the recommendation(s) contained in the above report (and as otherwise recorded in Part B below).

Signature

Date.....

Designation

PART B – TO BE COMPLETED BY THE DECISION TAKER FOR:

- 1) All key decisions taken by officers
- 2) Any non-key decisions that are sufficiently important and/or sensitive that a reasonable member of the public would reasonably expect it to be publicly available (see 'FOR DELEGATED DECISIONS' section of the guidance).

1. DECISION(S)
As set out in the recommendations of the report.

2. REASONS FOR DECISION
As set out in the report.

3. ALTERNATIVE OPTIONS CONSIDERED AND REJECTED BY THE OFFICER WHEN MAKING THE DECISION

4. ANY CONFLICT OF INTEREST DECLARED BY ANY CABINET MEMBER WHO IS CONSULTED BY THE OFFICER WHICH RELATES TO THIS DECISION *

* Contract standing order 6.6.1 states that for contract Variations with an Estimated Contract Value of £100,000 or more, the lead contract officer (LCO) must consult with the relevant cabinet member before the decision is implemented.

5. NOTE OF ANY DISPENSATION GRANTED BY THE MONITORING OFFICER, IN RESPECT OF ANY DECLARED CONFLICT OF INTEREST
<i>If a decision taker or cabinet member is unsure as to whether there is a conflict of interest they should contact the legal governance team for advice.</i>

6. DECLARATION ON CONFLICTS OF INTERESTS

I declare that I was informed of no conflicts of interests.*

or

I declare that I was informed of the conflicts of interests set out in Part B4.*

(* - Please delete as appropriate)

7. CONSIDERATION GIVEN TO WHETHER, AS A NON-KEY DECISION, THIS SHOULD BE FORWARDED TO THE CONSTITUTIONAL TEAM FOR PUBLICATION IN ACCORDANCE WITH REGULATION 13(4)*

The decision taker should consider whether although a non-key decision, the decision is sufficiently important and/or sensitive that a reasonable member of the public would reasonably expect it to be publicly available. Where there is any doubt, having considered the importance and/or sensitivity of a decision, it should be deemed that Regulation 13(4) would apply.

I consider that the decision be made available for publication under Regulation 13(4).*

or

I do not consider that the decision be made available for publication under Regulation 13(4).*

(* - Please delete as appropriate)

* Under the Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012, the council is required to put in place a scheme for recording and publishing some officer executive decisions. This process is sometimes referred to as "Regulation 13(4)".

BACKGROUND PAPERS

Background Papers	Held At	Contact
Title of document(s): GW3 Variation Decision – Adult Integrated Drug and Alcohol Treatment System	Environment and Leisure/DAAT	Donna Timms 07985 114279
Link: https://moderngov.southwark.gov.uk/mglIssueHistoryHome.aspx?Id=50028808&Opt=0		

AUDIT TRAIL

Lead Officer	Sangeeta Leahy, Director of Public Health	
Report Author	Donna Timms, Unit Manager - DAAT	
Version	Final V2	
Dated	8 July 2022	
Key Decision?	Yes	
CONSULTATION WITH OTHER OFFICERS / DIRECTORATES / CABINET MEMBER		
Officer Title	Comments Sought	Comments included
Strategic Director of Finance and Governance	Yes	Yes
Head of Procurement	Yes	Yes
Director of Law and Governance	Yes	Yes
Director of Exchequer (for housing contracts only)	N/A	N/A
Cabinet Member	Yes	Yes
Contract Review Boards		
Departmental Contract Review Board	Yes	Yes
Cabinet Member	Yes	Yes
Date final report sent to Constitutional/Community Councils/Scrutiny Team	Date/Month/Year e.g. 5 July 2020	