

<b>Item No.</b>	<b>Classification:</b> Open	<b>Date:</b> March 2015	<b>Meeting Name:</b> Cabinet Member for Public Health, Parks & Leisure
<b>Report title:</b>		Extension of awards and grants to substance misuse treatment services (Tier 4 and clinical)	
<b>Ward(s) or groups affected:</b>		All	
<b>From:</b>		Strategic Director of Environment and Leisure	

## RECOMMENDATION

1. That the Cabinet Member for Public Health, Parks & Leisure approves the extension of grant awards to the substance misuse treatment providers named in paragraph 19.
2. That the Cabinet Member for Public Health, Parks & Leisure notes the intention to reconfigure the Tier 4 treatment pathway in 2015/16 following the outcome of the review in March 2015 with a view to piloting a revised model which will deliver efficiency savings in 2016/17.

## BACKGROUND INFORMATION

1. The Health and Social Care Act 2012 placed responsibility for the public health functions to be transferred from the National Health Service (NHS) to local authorities.
2. 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 contracts transferred from Southwark Primary Care Trust (PCT), which was then abolished, to Southwark Council.
3. A number of the PCT contracts that transferred to the council were due to expire on 30 September 2013. These included contracts for substance misuse (drug and alcohol) treatment services provided by Cranstoun Drug Services, Equinox and Villa Street Medical Practice which transferred into the community safety and enforcement division of the council.
4. An IDM report dated 12 September 2013 sought approval to extend the current service provision for the existing providers for a period of 12 months between 1 October 2013 and 30 September 2014 by transferring the contracts into grant awards. The approval was granted on 20 September 2013 by the then Cabinet Member for Finance, Resources and Community Safety.
5. An IDM report dated September 2014 sought approval to extend the grant awards to the providers detailed for a further period of six months between 1 October 2014 and 31 March 2015 to enable the Drug Action & Alcohol Team (DAAT) to plan and make decisions as to the future commissioning framework for the borough-wide substance misuse treatment system. The approval was granted on 2 October 2014 by the Cabinet Member for Community Safety & Volunteering.

## KEY ISSUES FOR CONSIDERATION

6. Southwark DAAT has undertaken a review of substance misuse treatment service provision throughout the 2014/15 financial year. As at January 2015, the focus of the review has turned to Tier 4 specialist services comprising of inpatient detoxification / stabilisation and residential rehabilitation provision.
7. Tier 4 specialist services are targeted at individuals with a high level of presenting need and are necessary to support those with complex drug and alcohol issues, those in crisis and those requiring medical stabilisation. They represent one of the most costly areas of substance misuse provision for the council.
8. It has become clear that there is a need to reconfigure the existing Tier 4 treatment pathway into a model of delivery that will enable improved risk management processes, financial governance and management of the funding allocation decision-making process.
9. An independent review of the Tier 4 treatment pathway in Southwark was commissioned by the DAAT and commenced in January 2015. The review is due to complete in March 2015 and will provide a clear set of recommendations to inform the revised model of delivery from 1 April 2015.
10. In order to design, implement and embed the reconfigured pathway, it is proposed that a new delivery model will be piloted throughout 2015/16 with a view to a further review in January 2016 and decision on the final model to be adopted in the borough from 1 April 2016.
11. Villa Street Medical Practice delivers Primary Care substance misuse services to some of the more complex service users who are managed in the community rather than in specialist treatment services. It is an ambition of the new treatment system model to increase the number of service users who are managed by Primary Care providers in the community on the basis that this will enhance opportunities for reintegration into society and will represent a more cost-effective delivery model for the council.
12. In order to continue to support the delivery of Primary Care substance misuse treatment during the transitional period of re-commissioning the overall treatment system, there is a need to align the existing Villa Street Medical Practice service with the procurement and mobilisation of the new service contract to provide stability for service users throughout 2015/16.
13. Due to the timescales involved in the two processes outlined in paragraphs 10 and 12, it is necessary to seek approval for a further extension of the grant awards detailed within this report for a period of one year. This is to ensure the maintenance of a steady-state of service provision from 1 April 2015 and throughout 2015/16 whilst the relevant processes take place.
14. Whilst it is not mandatory under primary or secondary legislation for the council to provide the services, commissioners consider it essential that existing services continue to be provided without a detrimental impact to vulnerable users and their families for whom there could be serious negative consequences if existing service provision ceases on 31 March 2015.
15. The benefits of providing effective drug and alcohol treatment has been researched and demonstrated through clinical trials, government and private funded research.

Public Health England estimates that for every £1 invested in substance misuse treatment in Southwark, £2.77 is saved for the borough in costs as well as benefiting communities and individuals.

16. The majority of the individuals accessing the services have complex and multiple needs including physical and mental health issues, involvement with the Criminal Justice system, safeguarding, social exclusion and impaired social functioning. Continued engagement with the services is essential to help reduce escalating costs being incurred by council and health services. Engagement with effective substance misuse 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 antisocial and criminal behaviour can be prevented by effective substance misuse treatment.
17. Effective substance misuse treatment also impacts on cross council priorities including the Troubled Families' agenda, reduction of offending behaviour and safeguarding.
18. A joint strategic needs assessment was published in 2013 which assessed current and projected substance misuse needs in Southwark focusing on adult substance misuse needs. Specific alcohol and young people's needs assessments were undertaken in 2009. These will be reviewed and updated by the end of March 2015. These reports will be used to inform commissioning decisions, in line with Southwark's Joint Health and Wellbeing Strategy.
19. The scope of the services is as follows:

#### **1 April 2015 – 31 March 2016**

##### Tier 4 Services

- a. Cranstoun City Roads – Inpatient Crisis and Planned Admissions Service
- b. Equinox Drug Services – Inpatient Detoxification Service

##### Clinical Services

- a. Villa Street Medical Practice – Primary Care substance misuse treatment provision

#### **General overview of all services**

20. Currently 34% of the Public Health grant allocation is apportioned to substance misuse treatment, although this is set to be reduced in the 2015/16 financial year in accordance with the drive towards investment in early intervention and preventative services to reduce the likelihood and need for acute specialist treatment at a later date. Substance misuse treatment is monitored in accordance with activity and outcomes for numbers of drug users engaged in effective treatment and the number of successful completions. Public Health England is in the process of revising activity and outcomes indicators at present.
21. Core monitoring arrangements under grant will remain the same throughout the extension periods with a renewed focus on the use of innovation within service delivery in order to meet presenting need and evidencing positive outcomes for service users.

## **ECONOMIC CONSIDERATIONS**

22. The benefits of drug and alcohol treatment provision have been extensively researched and demonstrated to have a positive impact on individuals, families, communities and society in general.
23. There is significant evidence that effective drug and alcohol treatment reduces the harm to communities from dependency and is effective in improving a range of outcomes for individuals. Positive outcomes do not arise from the successful completion of treatment alone, but are evidenced from the improved health, stability, social functioning and reduction in crime that is observed on treatment commencement. The absence from treatment engagement of many adults and young people imposes significant economic and social costs on the borough. These costs are primarily reflected in the cost of crime committed by adults and young people using substances and costs to the NHS associated with the treatment of acute and chronic drug and alcohol related conditions. Individuals who are actively using substances are less likely to be in education, employment or training and leave school without qualifications, which has a cost to the local authority in relation to welfare and to the individual in terms of lower wages and poorer employment prospects.

## **POLICY IMPLICATIONS**

24. The Health and Social Care Act 2012 states that local authorities are responsible for public health commissioning. It sets out a duty for the authority to “take such steps as it considers appropriate for improving the health of the people in its area”. The new role for local authorities is to lead work to tackle health inequalities across the system, and to champion improvements in health and wellbeing outcomes for local populations.
25. Following the transfer of public health accountabilities from the NHS, local authorities receive a ring-fenced public health budget (until 31 March 2015) set by the Department of Health. Local authorities are expected to be 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 grant award requested here is in accordance with the Council’s responsibilities for commissioning of public health services and Southwark’s Joint Health and Wellbeing Strategy.

## **CONTRACT MANAGEMENT AND MONITORING**

26. A comprehensive performance and contract management framework is already in place for substance misuse service provision. All providers are required to comply with the National Drug Treatment Monitoring system (NDTMS) and in the provision of treatment data to the Department of Health. All NDTMS adult data is collected, collated and analysed with monthly reports on performance that are reviewed by the DAAT Performance and Data Manager and commissioners.
27. All providers are subject to formal quarterly contract meetings with the DAAT. There is a monthly partnership meeting with all substance misuse providers to assess performance and service improvement which is attended by directors and senior managers of all services.

## **COMMUNITY IMPACT STATEMENT**

28. The joint strategic needs assessment identified the current and projected needs for substance misuse treatment in Southwark. Due to the referral process and the specialised nature of the services being offered 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.
29. A key initial principle of the public health transition was that it would maintain 'steady-state' of delivery and the continuation of award of the proposed grants will be aligned with this.
30. The involvement of communities is a key part of the work of all parts of the health system. The value of including the wider views of individuals and communities is critical to both understanding and tackling the health and wellbeing issues in the borough. Engagement with the community and with people accessing commissioned public health services is a core principle within commissioning strategies for the public health services within the council. The impact of this service on the community, and the views of the local community about this service, continues to be a core element of the review work of public health services described within this report for future commissioning and procurement strategies.
31. The cost and impact on society increases if an individual misuses drugs and/or alcohol. Whilst only a small proportion of those in treatment commit crime, the levels are such that treatment brings about significant savings to society overall. In addition those in treatment are often vulnerable with social exclusion issues. This is highlighted in over 50% of the council's care proceedings currently having a substance misuse element.

## **RESOURCE IMPLICATIONS**

32. The extension of grant awards for the named substance misuse treatment providers for the periods stated is to be funded from a combination of resources – Public Health Grant (including CCG contribution) and LBS Adults' Services
33. All funding contributions have been confirmed for 2015/16.

## **SUPPLEMENTARY ADVICE FROM OTHER OFFICERS**

### **Director of Legal Services**

34. This report seeks approval of the award of further grants to providers of substance misuse treatment services, as detailed in paragraph 19.
35. The decision to approve the report recommendation is one which is to be taken by the Cabinet Member under Part 3D of the Council Constitution.
36. The proposed grant awards are consistent with statutory duties and with corporate policy in this area. The Director of Legal Services is aware that an equality analysis had been carried out as part of an earlier review of service needs and advises that officers should review it periodically, in line with the

requirements of the Public Sector Equality Duty imposed by the Equality Act 2010.

### Strategic Director of Finance and Corporate Services (E&L/14/017)

37. This report seeks approval to the extension of grant awards to the named substance misuse treatment providers. The financial implications are contained in the body of the report.
38. The strategic director of finance and corporate services notes the award for the financial year 2015/16. The funding for the awards is confirmed for 2015/16.
39. The grant awards will be monitored on a regular basis as part of the departmental revenue monitoring process.

### BACKGROUND PAPERS

Background Papers	Held At	Contact
Approval and Award of Grants to Substance Misuse Treatment Service Providers <a href="http://moderngov.southwark.gov.uk/mgIssueHistoryHome.aspx?Id=22349&amp;Opt=0">http://moderngov.southwark.gov.uk/mgIssueHistoryHome.aspx?Id=22349&amp;Opt=0</a> <a href="http://moderngov.southwark.gov.uk/mgDecisionDetails.aspx?Id=22349&amp;Opt=1">http://moderngov.southwark.gov.uk/mgDecisionDetails.aspx?Id=22349&amp;Opt=1</a> .	160 Tooley Street London SE1 2TZ	Donna Timms 020 7 525 7497
Extension of grant awards to substance misuse treatment providers  <a href="http://moderngov.southwark.gov.uk/mgDecisionDetails.aspx?Id=50004713&amp;Opt=1">http://moderngov.southwark.gov.uk/mgDecisionDetails.aspx?Id=50004713&amp;Opt=1</a>		

### APPENDICES

No	Title

## AUDIT TRAIL

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<b>Report Author</b>	Jonathon Toy, Head of Community Safety & Enforcement, E&L	
<b>Version</b>	Final	
<b>Dated</b>	5 March 2015	
<b>Key Decision?</b>	Yes	
<b>CONSULTATION WITH OTHER OFFICERS / DIRECTORATES / CABINET MEMBER</b>		
<b>Officer Title</b>	<b>Comments Sought</b>	<b>Comments included</b>
Director of Legal Services	Yes	Yes
Strategic Director of Finance and Corporate Services	Yes	Yes
<b>Cabinet Member</b>		
<b>Date final report sent to Constitutional/Community Councils/Scrutiny Team</b>		