

| Report for: | Cabinet |
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| Date of Meeting: | 23rd September 2021 |
| Subject: | Harrow Young People’s substance Misuse Service |
| Key Decision: | Yes |
| Responsible Officer: | Carole Furlong - Director of Public Health |
| Portfolio Holder: | Cllr Krishna Suresh - Portfolio Holder for Equalities & Public Health  Cllr Natasha Proctor - Deputy Leader of the Council and Portfolio Holder for Finance & Resources |
| Exempt: | No |
| Decision subject to  Call-in: | Yes |
| Wards affected: | All |
| Enclosures: | Appendix A: Equalities Impact Assessment |

| Section 1 – Summary and Recommendations |
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| This report sets out the re-procurement that Harrow Public Health Service plans to undertake for the Harrow Young People’s Substance Misuse Service. Recommendations: Cabinet is requested to:   * Authorise the re-procurement of a Young People’s Substance Misuse Service. * Delegate authority to award a contract for a Young People’s Substance Misuse Service to the Director of Public Health, following consultation with the Corporate Director of People’s Service, Chief Financial Officer and Portfolio Holders for Equalities & Public Health, and Finance & Major Contracts, and Children & Young Peoples’ Services and Education  Reason: The Public Health grant conditions ([public health grant conditions](https://www.gov.uk/government/publications/public-health-grants-to-local-authorities-2020-to-2021)) make it clear that “A local authority must, in using the grant: have regard to the need to improve the take up of, and outcomes from, its drug and alcohol misuse treatment services”. The Young People’s Substance Misuse Service will be funded wholly from the Public Health budget allocation.  The contract in question has an individual contract value in excess of £500,000 and therefore cabinet approval is required to procure a new service. |

## Section 2 – Report

### Introductory paragraph

The current Young People’s Substance Misuse Service commenced on 1st October 2015 with a contract length of 2.5 years + 2 years extension. The Harrow Young People’s Substance Misuse Service contract came to an end on 31st March 2020. The annual value of this Service is £218,499 and was under the “Light Touch Regime” threshold so a direct contract award for 2 years (until 31st March 2022) was offered to, and accepted by the current Provider.

As part of the Public Health England (PHE) Requirements laid out in the Health and Social Care Act 2012, local authorities are responsible for commissioning health and social care services for residents.

The commissioning of this Service enables the Council to discharge its duties in relation to the:

* **Health and Social Care Act 2012**: to commission best value and effective services which deliver better outcomes for local residents in relation to their health/wellbeing.
* **Criminal Justice Act 1991**: to provide community treatment to offenders.
* **Children’s Act 1989**: to “safeguard and promote the welfare of children within their area who are in need and so far as is consistent with that duty, to promote the upbringing of such children by their families by providing a range and level of services appropriate to those children’s needs”.

The contract value of the Young People’s Substance Misuse is over £500k so Cabinet approval is required under the Contract Procedure Rules (CPRs) and the Council’s Financial Regulations. A competitive tendering exercise will be carried out in accordance with the CPRs.

### Options considered

* Re-procurement of the Young People’s Substance Misuse Service is required to continue engagement and maintain support for Harrow’s young people and their families (and wider community) who are affected by substance misuse.
* There is no rationale for Harrow Council to deliver the Young People’s Substance Misuse Service directly as the Council does not have the clinical structure/experience or skill to deliver a treatment and recovery pathway. Relevant skills for the delivery of this Service lies within an experienced specialist Provider either within the NHS or voluntary sector.
* There is no option to extend the current Harrow Young People’s Substance Misuse Service as the current contract is a 2 year Direct Award.

## Current situation

Harrow Young People’s Substance Misuse Service is a single treatment and recovery pathway with a Single Point of Access and ‘no wrong door’. The Service is delivered by one Provider from one site in Harrow plus co-locations within other agencies including L.A. Harrow Children’s Service, Child and Adolescent Mental Health Service, Schools, Colleges and Youth Offending Service.

Harrow Young People’s Substance Misuse Service is currently delivered by Compass [Harrow Young People's Substance Misuse Service | Compass (compass-uk.org)](https://www.compass-uk.org/services/harrow-young-peoples-substance-misuse-service/)

Harrow Public Health is committed to fulfilling the requirements of the Government Drug Strategy (2017), The Government Alcohol Strategy (2012), PHE Guidance: Parents with alcohol and drug problems: adult treatment and children and family services (2021), the Public Health Outcome Framework: Improving Outcomes and Supporting Transparency (2013-2016), Working Together to Safeguard Children (2018), PHE Young people’s substance misuse treatment statistics [Young people's substance misuse treatment statistics 2019 to 2020: report - GOV.UK (www.gov.uk)](https://www.gov.uk/government/statistics/substance-misuse-treatment-for-young-people-statistics-2019-to-2020/young-peoples-substance-misuse-treatment-statistics-2019-to-2020-report)

Harrow’s Young People’s Substance Misuse Service specialises in delivering drug and alcohol treatment, crime reduction interventions for young drug and alcohol offenders and targeted services for young people affected by substance misuse. Together these services minimise the impact that substance misuse has on individuals and community, ultimately making a positive contribution to addressing health inequalities and crime reduction priorities of the Safer Community Board.

Re-procurement of a new service model will:

* comply with procurement regulations
* deliver improved outcomes for young people by reducing levels of harm caused to health, meet the needs of diverse communities and address health inequalities
* reduce drug and alcohol related crime and anti-social behaviours
* ensure young people have the best opportunity to stay safe, achieve and make a positive contribution
* improve harm reduction outcomes for young people in relation to Hepatitis B, C and HIV testing and Hepatitis B vaccination
* improve joint working with statutory and voluntary services i.e. Children and Families’ and Safeguarding services

Officers seek authority to tender a new Young People’s Substance Misuse Service, the proposed contract term will be three years: 1st April 2022 until 31st March 2025.

**Why a change is needed**

There is no option to extend the current Harrow Young People’s Substance Misuse Service as the opportunity was not contained in the current directly awarded contract and this would leave Harrow Council vulnerable to challenge bearing in mind the value of this 3-year Contract. The new Service specification will reflect the outcome of the Harrow Public Health’s Needs Assessment undertaken this year and will include additional bespoke preventative work Primary school age children.

## Implications of the Recommendation

### Considerations

The Service is currently funded from the existing Public Health budget - please see **Financial Implications.**

This Service will be contracted out to a Health or Registered Voluntary sector provider. TUPE will apply to this contract but there are no implications for L.A. Harrow.

**Local Performance**

Contract Performance meeting each quarter – also attended by Harrow CCG DesignatedNurse Safeguarding Children.

Performance data taken from L.A. Harrow Substance Misuse Service Performance Template, PHE National Drug Treatment Monitoring Service (NDTMS), Reports i.e. HSCB.

#### Data Protection Implications

Following a review of documentation for the purposes of compliancy with GDPR, PHE have put in place a Data Sharing Protocol to cover the sharing of data by L.A. Harrow commissioned services. PHE Data Sharing Protocol (for the purposes of sharing some service user treatment data with the PHE NDTMS system) has been reviewed/approved by L.A. Harrow Information Governance Lead and subsequently signed off by L.A. Harrow Substance Misuse Commissioner.

The re-procurement of the new Harrow Adult Substance Misuse Service will require a Case Management System to be incorporated within the new Service.

### Risk Management Implications

It is important to note that sourcing suitable community premises may not be feasible within the procurement timescales. In addition, the premises need to meet all legal and planning regulations in order to deliver core services. An example where delay may occur and affect the procurement timetable may be the need of a D1 planning status for the treatment services. Whilst the new provider develops their own property strategy to locate within the community we will work with the outgoing and incoming Provider to ensure that the service is not disrupted.

Services users/young people will be updated via the current Service’s in-house communications and Harrow wide communications via Safeguarding Children Board communications.

A separate risk register is in place for the procurement and mobilisation of the new Service.

Risks included on corporate or directorate risk register? **No**

The relevant risks contained in the register are attached/summarised below. **Yes** – please see above response

The following key risks should be taken into account when agreeing the recommendations in this report:

| **Risk Description** | **Mitigations** | **RAG Status** |
| --- | --- | --- |
| **Risk if Proposal does not go ahead:**  L.A. Harrow will be unable to fulfil its obligation under Health and Social Care Act 2012, Criminal Justice Act 1991 and Children’s Act 1989 to ensure effective substance misuse services (to educate/deter and treat) are in place to meet the needs of Harrow young people and their families to mitigate the negative effect to the young people, their families and the wider community | * Approval of Cabinet to procurement of the service * Service users/young people to be kept updated via the current Service’s in-house communications and Harrow-wide communications via Safeguarding Children Board communications. | Red – whilst awaiting approval by Cabinet |
| **Risks if Proposal does go ahead:**  (a) Sourcing suitable community premises for the service is not feasible within the procurement timescales resulting in delay in the delivery substance misuse services | * The new provider will develop their own property strategy to support locating within the Harrow community. * The Council will work with both the outgoing and incoming provider to ensure that the service is not disrupted. * The need for suitable premises will be a condition of the procurement. * The existing provider to be approached for lease of their premises if necessary. * Service users/young people to be kept updated via the current Service’s in-house communications and Harrow-wide communications via Safeguarding Children Board communications. | Amber |
| **Risks if Proposal does go ahead:**    (b) The premises for delivering core services do not comply with all relevant legal and planning regulations | * A service risk register to support decision-making and prioritize action is in place for the procurement and mobilization of the new service including in relation to procurement timescales. * Service users/young people to be kept updated via the current Service’s in-house communications and Harrow-wide communications via Safeguarding Children Board communications. | Green |

### Procurement Implications

It is intended that the Council will follow an OPEN Procedure; the contract term will be for three years.

The proposed top-level evaluation criteria will be:

Price 40%

Quality 50%

Social Value 10%

**Legal Implications**

The Health and Social Care Act 2012 (“the Act”) introduced changes by way of a series of amendments to the National Health Service Act 2006. The Act gives local authorities a duty to take such steps as it considers appropriate to improve the health of the people in its area. In general terms, the Act confers on local authorities the function of improving public health and gives local authorities considerable scope to determine what actions it will take in pursuit of that general function.

The Harrow Young People’s Substance Misuse Service Contract has a value in excess of the relevant threshold under The Public Contract Regulations 2015 in relation to contracts for services of this nature, so such services need to be competitively tendered under these Regulations.

The Contract value of the Harrow Young People’s Substance Misuse is over £500k so Cabinet approval is required under the Council’s Financial Regulations. A competitive tendering exercise will be carried out in accordance with the CPRs and Legal note that that the Council will be undertaking an Open procedure. A market engagement event will take place prior to the tender being issued, with a bidders’ day currently being scheduled to take place.

### Financial Implications

Public Health allocation of grant for Harrow for 2021/22 is £11,309,632 and funds the annual value of the current contract of £218.5k, in addition to the costs of the case management system of £15.5k.

The re-procurement of the Service will require the Case Management System to be incorporated within the new contract and the expectation is for any award of contract to be made within this cash envelope.

The re-procurement exercise will determine the amount of grant funding required to fund these services, however any changes in expenditure will need to be contained within the annual grant allocation.

The Public Health grant is currently ring-fenced until March 2022.  It is not clear what impact, any changes to the grant fund will have on the level of available resource, however whilst these services are not statutory, they meet Public Health outcomes and will need to be provided.

The eventual award of contract for these services will result in contractual obligations with the provider for services which are funded by external grant which cannot be guaranteed in the longer term.

### Equalities implications / Public Sector Equality Duty

Please see attached Equalities Impact Assessment

### Council Priorities

Through its clinical treatment, psychosocial recovery pathway and working within the wider multi-disciplinary health and social care, Harrow Young People’s Substance Misuse Service directly links to the Council priorities.

The Service will contribute to ensuring the health and wellbeing of local residents and those vulnerable residents have access to the information, support, diagnosis and treatment they require to achieve optimum health. The service user’s engagement in these services also has a positive impact on the family and the wider community.

* Making a difference for the vulnerable
* Making a difference for communities
* Making a difference for local businesses
* Making a difference for families

For example, drug and alcohol dependency goes hand in hand with poor health, homelessness, family breakdown and offending - all of which are associated with significant burden to public services and ultimately the taxpayer. Drug and alcohol treatment provides a positive return on investment both financially and socially by reducing costs to health, criminal justice and other sectors and reducing harms to individuals, families and communities.

Providing well-funded drug and alcohol services is good value for money because it cuts crime, improves health, and can support individuals and families on the road to recovery.

Figures taken from PHE’s alcohol and drug treatment commissioning tool for L.A.s demonstrates:

* Alcohol treatment reflects a return on investment of £3 for every £1 invested, which increases to £26 over 10 years.
* Drug treatment reflects a return on investment of £4 for every £1 invested, which increases to £21 over 10 years

<https://www.gov.uk/government/publications/alcohol-and-drug-prevention-treatment-and-recovery-why-invest/alcohol-and-drug-prevention-treatment-and-recovery-why-invest>

## Section 3 - Statutory Officer Clearance

**Statutory Officer:** Donna Edwards

Signed on behalf of the Chief Financial Officer

**Date:** 7th September 2021

**Statutory Officer:** Sarah Inverary

Signed on behalf of the Monitoring Officer

**Date:** 10th September 2021

**Statutory Officer:** Leila Gillespie

Signed on behalf of the Head of Procurement

**Date:** 7th September 2021

**Statutory Officer:** Neale Burns

Signed on behalf of the Head of Internal Audit

**Date:** 13th September 2021

**Chief Officer:** Paul Hewitt

Signed off by the Corporate Director

**Date:** 13th September 2021

## Mandatory Checks

### Ward Councillors notified: NO as it impacts on all Wards

### EqIA carried out: YES

### EqIA cleared by: Johanna Morgan - EQI Lead (People’s Directorate)

## Section 4 - Contact Details and Background Papers

**Contact:** Laurence Gibson, Consultant in Public Health, [Laurence.Gibson@harrow.gov.uk](mailto:Laurence.Gibson@harrow.gov.uk)

**Background Papers:**

None

Call-in waived by the Chair of Overview and Scrutiny Committee

**NO**

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