

Approval to spend grant funding for additional substance misuse treatment provision in 2024/25

Date: 24th April 2024

Report of: Head of Public Health (Drugs, Alcohol, Safer Communities)

Report to: Director of Public Health

Will the decision be open for call in? Yes No

Does the report contain confidential or exempt information? Yes No

Brief summary

Leeds City Council has been allocated funding by the Office of Health Improvement and Disparities to increase and enhance substance misuse treatment and recovery in the city. A Memorandum of Understanding which sets out the conditions of the grant and the Council's agreement to those conditions is in place and has been signed by the parties. Approval is now being sought for a number of initiatives to achieve these aims.

Recommendations

The Director of Public Health is recommended to:

- a) Approve the allocation of £228,228 from the Supplemental Substance Misuse Treatment and Recovery Grant as a contract modification (payment in instalments) to the Residential Alcohol Detoxification and Rehabilitation Service (DN410850) provided by St Anne's Community Services for additional residential detoxification and / or rehabilitation provision from 1st April 2023 to 31st March 2024. This will be done as a variation to this contract under the provision of the Provider Selection Regime.
- b) Approve the allocation of £120,779 from the Supplemental Substance Misuse Treatment and Recovery Grant as a contract modification (payable in instalments) to the IOM Support Service (DN387103) provided by Change Grow Live Services Ltd for additional support within criminal justice settings from 1st April 2024 to 31st March 2025. This will be done as a modification to this contract under the provision of the Provider Selection Regime.
- c) Approve the internal transfer of £92,419 from the Supplemental Substance Misuse Treatment and Recovery Grant to Children's Services, through a grant agreement, towards the cost of support workers in the Family Drug & Alcohol Court for the period of 1st April 2024 to 31st March 2025.

- d) Approve the direct award of a contract, under Contracts Procedure Rule 8.3, with Leeds Teaching Hospitals Trust to provide an Education Practitioner post from 1st April 2024 to 31st March 2025 at a cost of £54,000 from the Supplemental Substance Misuse Treatment and Recovery Grant.
- e) Approve the internal transfer of funding for existing Public Health and Integrated Commissioning posts between 1st April 2024 and 31st March 2025, at a cost of £465,723 from the Supplemental Substance Misuse Treatment and Recovery Grant.
- f) Approve the direct award of a contract, under the Provider Selection Regime, to Touchstone for the delivery of an outreach and prevention service from 1st April 2024 to 31st March 2025 at a cost of £52,619 from the Supplemental Substance Misuse Treatment and Recovery Grant.
- g) Accept £354,806 from the Office of Health Improvement and Disparities via the Inpatient Detoxification Grant for the period 1st April 2024 to 31st March 2025

What is this report about?

- 1 Following the publication of the Government's 10-year drug strategy – From Harm to Hope – additional funding has been made available by the Office of Health Improvement & Disparities (OHID) for local authorities to expand and enhance treatment provision. This report concerns three particular funding streams, the Supplemental Substance Misuse Treatment and Recovery Grant, the Supplementary Substance Misuse Treatment & Recovery Housing Support Grant and the Inpatient Detoxification Grant. The grants are confirmed on an annual basis.
- 2 The Supplemental Substance Misuse Treatment and Recovery Grant (SSMTRG) is intended to increase the number of people in treatment (20% nationally), reduce drug-related deaths, increase engagement of those leaving prison treatment services and improve service quality by increasing the staffing levels across treatment services and reducing caseloads. 2024/25 is Year 3 of this programme and has an allocation for Leeds of £8,212,541. This was contingent on the submission of a satisfactory proposal that had been co-produced with the local service provider. A detailed plan including ambitions, narrative and costings has now been approved by OHID.
- 3 The SSMTRG programme consists of:

Activity where no decision is required

- increasing and enhancing treatment provision within the Integrated Drug and Alcohol Service, known as Forward Leeds (contract ref 61854). This will build on the work of Years 1 and 2 to increase capacity across the service and offer more tailored support options to meet specific needs to improve accessibility and outcomes. In particular, the range of activities for people who have achieved their treatment goals will be expanded to further sustain and promote long-term recovery. The cost for 2024/25 is £7,183,857.10 and has already been injected into the contract through decisions D55671 (Authority to Procure) and D55980 (Contract Award).
- continuing to contribute to a Force Drugs Partnership and Training Officer post within West Yorkshire Police, the cost of which is shared with the other West Yorkshire local authorities. The purpose is to develop and disseminate information, intelligence and training on illegal and controlled drugs to partners and staff, particularly relating to drug-related deaths. Leeds' contribution is £14,915.90. Approval to enter into a joint agreement alongside the other local authorities was granted through an administrative decision on 6th March 2024.

Activity requiring a decision

- continuing the contribution towards residential alcohol detox and / or rehabilitation capacity at St Anne’s Residential Alcohol Detoxification and Rehabilitation Service (DN410850). The cost for 2024/25 is £228,228.
 - continuing the three roles within the Integrated Offender Management (IOM) support service (DN387103) provided by Change Grow Live Services Ltd to improve and enhance pathways between criminal justice settings and treatment. They will work alongside partners to co-ordinate prison releases, work within police custody, support court orders and court planning and support probation activities. The cost for 2024/25 is £120,779.
 - continuing the funding that for increasing capacity in the Public Health and Commissioning teams. The cost is £465,723.
 - continuing the contribution to the cost of two Family Drug and Alcohol Court (FDAC) workers, who work closely with families during the court proceedings process, supporting effective engagement in treatment. This will cost £92,419 and be managed via LCC Children’s Services.
 - continuing an Education Practitioner role within Leeds Teaching Hospitals Trust (LTHT) to act as a key point of contact for all ward staff on alcohol and drug issues to improve staff awareness and pathways into treatment. The cost for 2024/25 is £54,000.
 - adding outreach and prevention service (TOPS), to address high impact high dependency street drinking and related anti-social behaviour in Harehills through outreach and drop-in sessions at a local venue. The cost is £52,619 and will be delivered by Touchstone.
- 4 The Supplementary Substance Misuse Treatment & Recovery Housing Support Grant (HSG) is a three-year test and learn project running in a limited number of local authority areas with the aim of increasing the number of people recovering from addiction in stable and secure housing. The funding is being used to test the impact of targeted housing support interventions on recovery outcomes. The allocation for 2024/25, the second year of funding, is £588,237. The three-year plan agreed with OHID was reviewed in January 2024, with no changes made. This funding has already been injected into the contract through decisions D55671 and D55980.
- 5 The Inpatient Detoxification Grant (IPD) is provided to consortia of local authorities for additional medically managed inpatient detoxification. Leeds City Council is acting as the lead authority for a consortium including Barnsley Metropolitan Borough Council, Calderdale Metropolitan Borough Council and North Yorkshire County Council.
- 6 This group of local authorities came together because Humankind are the commissioned drug and alcohol treatment provider in each area. By working with Humankind to deliver the additional inpatient detoxification places across the consortium, it ensures that economies of scale can be applied to the purchase of additional places thereby delivering better value for money. In addition, as Humankind provides the treatment across the consortium, they can manage the purchase and referral process through existing arrangements with detoxification providers.
- 7 The funding enables 1,100 additional bed nights to be purchased across the consortium. They are allocated to people from each local authority area in proportion to the funding allocation for that authority area as outlined in the table below. This process will continue to be managed by Humankind and the consortium arrangements as a whole are managed by Leeds City Council.

Barnsley	£54,490
Calderdale	£42,767
Leeds	£195,061
North Yorkshire	£62,487

8 Ahead of confirming the allocations for 2024/25, OHID required the submission of a new plan for the coming year which provided an update to milestones, activity and costings. OHID have now approved that plan and confirmed the allocation of £354,806 for 2024/25. This funding has already been injected into the contract through decisions D55671 (Authority to Procure) and D55980 (Contract Award).

What impact will this proposal have?

- 9 The proposals support the Leeds Drug and Alcohol Strategy key outcome of increasing the proportion of people recovering from drug and / or alcohol misuse. It will do this by enabling investment in local services in order to increase capacity and quality, rebuild and develop the professional workforce, ensure better integration of services, improve access to stable and suitable accommodation alongside treatment, improve employment, and keep prisoners engaged in treatment after release.
- 10 An Equality, Diversity, Cohesion and Integration Screening has been completed in relation to this decision and there are no issues to be addressed.

How does this proposal impact the three pillars of the Best City Ambition?

Health and Wellbeing

Inclusive Growth

Zero Carbon

- 11 The proposal will contribute to achieving the Best City Ambition for Health and Wellbeing through the goal of “investing to ensure better and more equal access to essential services in health and learning, developed with and accessible for every community across Leeds”.
- 12 It is in line with the Best City Ambition’s Team Leeds approach, by providing a focus on prevention and taking strength and asset-based approaches to help people to realise their goals.
- 13 This activity will also contribute to the Zero Carbon ambition, since it includes remote delivery options This will take place at a number of sites to ensure easy access for service users, minimising the need to travel and encouraging the use of public transport. This helps to reduce carbon emissions and environmental pollution and the ability to better manage air quality. Furthermore, the type of interventions provided are aimed at improving health and well-being. This includes the prevention of hospital admissions, which helps ensure we manage our use of resource intensive (and high footprint) health and care services.
- 14 In addition, the proposal supports the Leeds Drug and Alcohol Strategy key outcome to increase the proportion of people recovering from drug and / or alcohol misuse.

What consultation and engagement has taken place?

Wards affected: All

Have ward members been consulted?

Yes

No

15 In line with the SSMTRG funding requirements, the proposal that was submitted to OHID to secure the funding was co-produced with the city’s Integrated Drug and Alcohol Service. There was also considerable consultation with other key stakeholders, including:

- Providers of all activities identified for funding
- Leeds Drug and Alcohol Partnership (including representation from the Integrated Commissioning Board)
- Leeds Health and Wellbeing Board
- Safer Leeds Executive

- Adults, Health and Active Lifestyles Scrutiny Board

16 Public Health Programme Board was consulted in April 2024.

17 The Executive Member for Adult Social Care, Public Health and Active Lifestyles was briefed on 26th January 2024 and 10th April 2024.

What are the resource implications?

18 The cost of the proposals described within this report will be met entirely by the Supplemental Substance Misuse Treatment & Recovery Grant, Supplementary Substance Misuse Treatment & Recovery Housing Support Grant and Inpatient Detoxification Grant provided by OHID.

19 As part of the conditions of the SSMTRG, OHID stipulates that Leeds City Council must maintain its existing investment in drug and alcohol treatment throughout the lifetime of the grant.

20 The following table details the value of the contract modifications required:

Contract Reference	Contract Name	Original contract value (including extensions)	Value of proposed modification	Cumulative value of contract modifications	Cumulative modifications as % of original value
DN410850	Residential Alcohol Detoxification and Rehabilitation Service	£5,106,150	£228,228	£591,318	12%
DN387103	Integrated Offender Management (IOM) support service	£3,600,000	£109,408	£311,149	9%

What are the key risks and how are they being managed?

21 Should a service provider fail to deliver the proposals, then there is a low risk that Leeds City Council could have to repay the grant to OHID. Contract modifications will reflect any clawback conditions attached to the funding received from OHID listed under this report. This will be mitigated by having providers with the necessary experience and skills to manage and deliver the required services, payment in instalments, a performance framework with KPIs, robust monitoring of the project by Adults and Health Integrated Commissioning Team and ongoing updates and communication with OHID.

22 Drug and alcohol programme risks (e.g., recruitment to a large number of posts) are actively discussed and managed as part of the team's project meetings, where the need for escalation of risk is determined.

What are the legal implications?

23 The proposal to accept the IPD is a Significant Operational Decision because it is less than £500,000 and therefore is not subject to call in.

24 The proposals concerning expenditure are Significant Operational Decisions as these decisions are a direct consequence of a Key Decision D57390 and as such are not subject to call in. There are no grounds for keeping the contents of this report confidential under the Access to Information Rules.

25 A Memorandum of Understanding which sets out the conditions of the grant and the council's agreement to those is in place. It has been signed by the Director of Public Health for LCC and the Director of Addiction and Inclusion for OHID.

Since 1st January 2024, the commissioning of Health Care Services are subject to the Health Care Services (Provider Selection Regime) Regulations 2023 and no longer subject to the PCRs. Modification of contracts must comply with Regulation 13, “Modification of contracts and framework agreements during their term”.

St Anne’s Residential Alcohol Detoxification and Rehabilitation Service

The nature of the activity falls within scope of the Provider Selection Regime (PSR), which stipulates how a contract originally awarded under the Public Contracts Regulations 2015 can be modified. The regulation 13 requires:

the modification is attributable to a decision of the relevant authority and both of the criteria in paragraph (2) are met.

(2) The criteria are—

(a) the modification does not render the contract or framework agreement materially different in character, and

(b) the cumulative change in the lifetime value of the contract or framework agreement since it was entered into or concluded is—

(i) below £500,000; or

(ii) less than 25% of the lifetime value of the original contract or framework agreement when it was entered into or concluded.

26 These conditions are met as:

the modification will extend the capacity of the contract and will not be a material change to the contract and the cumulative value of all modifications, including this one is 12%, therefore is less than 25% of the original contract value.

A confirmation of modification will be published on Find a Tender Service (FTS) within 30 days of the contract modification to comply with the transparency requirement.

CGL Integrated Offender Management Service

27 The nature of the activity falls within scope of the PSR, which stipulates that where the contract was originally awarded under the Public Contracts Regulations 2015, then modifications are permitted when modification is attributable to a decision of the relevant authority and does not materially alter the character of the contract or framework agreement, and the cumulative change in the lifetime value of the contract or framework agreement, compared to its value when it was entered into, is under £500,000 or under 25%.

28 These conditions are met, since the additional posts are within the character of the contract, and the value of the modifications to date including this one does not exceed £500,000 or 25%, as shown in paragraph 16. As the modification described in this report is below the £500,000 and represents less than 25% of the lifetime value of the original contract, the modification is permissible but will not necessitate the publication of a notice on the Find a Tender Service

Leeds Teaching Hospitals Trust (LTHT)

29 This activity is not within scope of Provider Selection Regime because the role concerns working with hospital staff around development and training, and is not delivering healthcare to individuals.

30 The direct award of a contract under the value of £100,000 is permissible under Contracts Procedure Rule 8.3 where only a particular organisation can meet the council’s requirements. This applies to this contract, because the objectives are about improving LTHT’s mainstream offer rather than providing a specialist service. Furthermore, it is predominantly nurses who conduct screening on admission, and it is within this workforce that the work needs to be focused, so hosting the post at LTHT is where it will get the most traction, credibility, and peer support from others doing a similar role. The proposed direct appointment has been assessed against the

provisions of the Subsidy Control ensure that no unlawful subsidy is provided, and it is not a subsidy on the grounds that it is not economic activity.

Touchstone

31 The nature of the activity falls within scope of the PSR, since the aim is to engage with individuals around their alcohol use and to support them to engage with healthcare services. The regulations allow for a direct contract award where the activity and provider meet its key criteria. An assessment will take place to assess the most appropriate mechanism for doing so. The proposed direct appointment has been assessed against the provisions of the Subsidy Control ensure that no unlawful subsidy is provided, and it is not a subsidy on the grounds that it is not economic activity.

Internal transfer of funds for Public Health and Commissioning posts

32 There are no legal implications as only Leeds City Council can undertake the required commissioning function required by the grant programme.

Options, timescales and measuring success

What other options were considered?

33 The overarching intention of this funding is to deliver a world-class treatment and recovery drug and alcohol service within Leeds. To achieve this, the programmes were jointly developed with existing service partners and key stakeholders. As such, this report describes the only viable option to ensure that the city achieves the intended outcomes required by the funder.

How will success be measured?

34 Performance frameworks and monitoring processes will be put in place by the Adults and Health commissioning team to ensure value for money, delivery of the intended outcomes and improved service quality. In addition, the council will provide OHID with performance information to meet their requirements.

What is the timetable and who will be responsible for implementation?

35 The proposals will be implemented as soon as possible following approval of these recommendations and the completion of the Call In period of the Key Decision (see paragraph 19), by officers in the Adults and Health Commissioning Team.

Appendices

- Equality, Diversity, Cohesion and Integration Screening

Background papers

- None