

**Report of: Strategy and Commissioning**

**Report to: Ian Cameron, Director of Public Health**

**Date: 23 June 2016**

**Subject: Request to approve a contract variation in accordance with Contracts Procedure Rule (CPR) 21.7 to vary the contract awarded to Developing Initiatives for Support in the Community (DISC) for the Community Drug and Alcohol Prevention Treatment and Recovery Service (known as Forward Leeds)**

Are specific electoral wards affected? If relevant, name(s) of ward(s):	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Are there implications for equality and diversity and cohesion and integration?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Is the decision eligible for call-In?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Does the report contain confidential or exempt information? If relevant, access to information procedure rule number: Appendix number:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

**Summary of main issues**

1. In 2014 the contract for delivery of the Community Drug and Alcohol Prevention, Treatment and Recovery Service (YORE-9F7N76) was awarded to DISC (Developing Initiatives for Support in the Community) with the new service, known as Forward Leeds, commencing on 1 July 2015 with an annual contract value of £8.5m.
2. As a direct result of the recent Public Health Grant cuts announced by the Government a review of commissioned services has been undertaken resulting in a proposal to reduce the annual contract value of the above contract by 2% with effect from 1 July 2016. This would see the annual contract value reduce by £170,000 p.a. from £8,499,730 p.a. to £8,329,730 p.a.
3. A significant operational decision is required to give approval to reduce the contract value in accordance with Contracts Procedure Rule (CPR) 21.7.

**Recommendations**

4. The Director of Public Health is recommended to approve a variation to the above contract with DISC in accordance with Contract Procedure Rule 21.7 to reduce the annual contract value by 2% with effect from 1 July 2016.

## **1. Purpose of this report**

- 1.1 This report seeks approval to vary the contract with DISC for the Community Drug and Alcohol Prevention, Treatment and Recovery Service (YORE-9F7N76) which is known as Forward Leeds to reduce the annual value of the above contract by 2% with effect from 1 July 2016. This would see the annual contract value reduce by £170,000 p.a. from £8,499,730 p.a. to £8,329,730 p.a.

## **2. Background Information**

- 2.1 In 2014 the contract for delivery of a combined drug and alcohol prevention, treatment and recovery service for adults, children and young people in Leeds was awarded to DISC with the new service commencing on 1 July 2015. Known as Forward Leeds, the service is delivered by DISC in conjunction with four consortium partners (Barca, St Anne's, St Martin's Healthcare Services and Leeds and York Partnership Foundation Trust) and with the involvement of a number of GP practices across the city.
- 2.2 The Forward Leeds service is approaching its first anniversary of delivery on 1 July and the announcement of the Public Health Grant cuts earlier in the year came at a time when the service was still developing and embedding the new integrated model of delivery across the city.

## **3. Main issues**

- 3.2 Forward Leeds has identified ways in which savings of 2% during 2016/17 can be achieved primarily through identifying recurrent and non-recurrent savings, streamlining management structures and finding alternative ways of delivering provision as follows:
- Each Forward Leeds partner has found recurrent and non-recurrent savings proportional to their share of the contract value. Recurrent savings are from reductions in travel, mobile phone and staff training expenditure and a reduction in locum and agency costs. Non-recurrent savings are from predicated vacancies and agreement not to fill part posts.
  - A Reduction and Motivation Programme (RAMP), currently delivered through a service level agreement with an organisation called Acorn, will be delivered in-house by DISC who have the capacity to deliver a programme of comparable quality.
  - Innovative ways of delivering and fundraising will help reduce costs for service user activities.
  - The senior manager and lead practitioner roles for children and young people have been combined into a single role. The streamlining of these roles is not expected to impact on the maintenance and provision of an appropriate quality service to Children and Young people and has been achieved without redundancies. The frontline staffing is unaffected at this time.
- 3.3 The impact of these changes is expected to be minimal and will not alter the nature or scope of the service being delivered or its effectiveness.

- 3.4 With regard to equality, diversity, cohesion and integration these changes are expected to have no adverse or differential impact on different client / equality groups.
- 3.5 The reduction will apply from 1 July 2016 with a full annual amount being realised in 2016/17 as follows :

<b>2016-17</b>	<b>Original Value</b>	<b>Revised Value</b>	<b>Reduction</b>
(1 Apr – 30 Jun 2016)	£2,124,933	£2,124,933	-
(1 Jul 2016 – 31 Mar 2017)	£6,374,797	£6,204,797	£170,000
<b>Total</b>	<b>£8,499,730*</b>	<b>£8,329,730*</b>	<b>£170,000*</b>

\*Investment in the service by the Leeds Clinical Commissioning Groups is not included in these figures and remains unchanged.

- 3.6 Implementation of the reduction from 1 July 2016 rather than the start of the financial year on 1 April 2016 has enabled a considered approach to be taken to help ensure that service continuity is maintained and that the momentum of the new service is not lost. This has also helped minimise the impact on the accessibility and effectiveness of the service for different equality groups.
- 3.7 This report relates to a reduction of 2% to the annual contract value effective within the current financial year. Further discussions are taking place with Forward Leeds to identify savings which would equate to a 10% reduction of the original contract value from 1 April 2017. The outcome of these discussions will be the subject of a separate report and DDN later in the year.
- 3.8 Allowing the contract value to remain unchanged during 2016/17 was not considered an option as the size of the Public Health Grant cut required savings to be found from across all commissioned services.

#### **4.1 Consultation and engagement**

- 4.1.1 Consultation about the Public Health Grant cuts has been undertaken with Public Health staff, the Executive Member for Health & Wellbeing, Cabinet, Labour Group and providers.
- 4.1.2 In accordance with CPRs, the variation to reduce the value of this contract has already been discussed and agreed with DISC.
- 4.1.3 The Director of Public Health and the Head of Commissioning met with senior managers from Forward Leeds and the Chief Executive of DISC earlier in the year to outline the proposed reductions to annual contract values and there was follow up correspondence by letter. Contract management officers have subsequently met with Forward Leeds managers to identify and agree how the service will achieve savings of 2% without impacting on the nature and effectiveness of service delivery.

#### **4.2 Equality and diversity / cohesion and integration**

- 4.2.1 The current Forward Leeds service has been in operation since 1 July 2015 and reflects the specification for a new integrated model which involved service users in its design and re-commissioning following a lengthy period of consultation with a wide range of stakeholders across the city.
- 4.2.2 The Forward Leeds service is available to all Leeds residents but in particular works with many service users who have complex needs including mental health problems and homelessness. It includes dedicated support for expectant mothers, children / young people and families including those participating in the Family Drug and Alcohol Court pilot in West Yorkshire. GPs often have regular contact with or are often a first port of call for many of these protected groups making them ideally placed to engage people in support and treatment.
- 4.2.3 An EDCI screening assessment has been undertaken (Appendix 1) and it is not envisaged that the 2% reduction to the annual contract value will have a differential or adverse impact on the accessibility or effectiveness of the service for different equality groups. This will be monitored through ongoing analysis of Forward Leeds service and equality data.

### **4.3 Council policies and best council plan**

- 4.3.1 The Forward Leeds service is the principal deliverer of many elements of the Leeds Drug and Alcohol Strategy and Action Plan 2016 -18 which sets out the following ambition that: "Leeds is a city that promotes a responsible attitude to alcohol and where individuals, families and communities affected by the use of drugs and alcohol can reach their potential and lead safer, healthier and happier lives".
- 4.3.2 Besides delivering the vision and objectives of the Leeds Drug and Alcohol Strategy and Alcohol Plan the Forward Leeds service is also a key contributor to other Council and city wide plans and objectives including:
- the Best Council Plan which includes "supporting healthy lifestyles and supporting communities and tackling poverty" amongst its aims
  - the Leeds Joint Health and Wellbeing Strategy outcome of "People will live longer and healthier lifestyles"
  - the Safer Leeds Strategy objective to "reduce crime related to drugs and alcohol"
  - "supporting people to live longer and have healthier lives" which is a key aspiration of the Leeds vision 'to be the best city in the UK by 2030'.

### **4.4 Resources and Value for Money**

- 4.4.1 As a direct result of the Public Health Grant cuts announced by the Government, this report is seeking approval of a contract variation to reduce the annual value of the contract with DISC for the Forward Leeds service by 2% with effect from 1 July 2016. This will enable the Council to find savings of £170,000 per annum.
- 4.4.2 The reduced cost of the Forward Leeds service in 2016/17 (£8,329,730) will be met from the new reduced Public Health ring fenced grant.

- 4.4.3 Contract management officers have worked with Forward Leeds to identify and agree how savings of 2% could be achieved without impacting on delivery so as to ensure the service continues to deliver a safe and effective service that represents value for money.

#### **4.5 Legal Implications, access to information and call in**

- 4.5.1 CPR 21.7 states that all contract variations must be in writing and signed by the Council and the provider. Public Health has already consulted and agreed the reduced contract value with the provider. There is no variation to the service specification. Once this report has been approved, formal contract documentation will be updated and published by PPPU.
- 4.5.2 Although there is no overriding legal obstacle preventing the variation of this contract, the contents of this report should be noted. In making the final decision, the Director of Public Health should be satisfied that the course of action chosen represents best value for money.
- 4.5.3 This is a significant operational decision as the annual reduction of £170,000 is greater than £100,000 but not more than £250,000. The decision is therefore not subject to call in and there are no grounds for treating the contents of this report as confidential under the Council's Access to Information Rules.

#### **4.6 Risk management**

- 4.6.1 Officers in Strategy and Commissioning will work closely with Forward Leeds through the established contract monitoring processes to ensure the service delivers against agreed objectives and targets.
- 4.6.2 Forward Leeds service and equality data will be monitored to ensure there is no differential or adverse impact on the accessibility or effectiveness of the service for different equality groups.
- 4.6.3 The Forward Leeds service works with clients experiencing a range of physical and mental health needs and involves the collection and storage of highly sensitive information in delivering the service. Officer in Strategy and Commissioning will continue to review and work with the Forward Leeds service to ensure appropriate safeguarding and information governance arrangements are in place across the Forward Leeds service.
- 4.6.4 Officers in Strategy and Commissioning will continue to work closely with Forward Leeds to identify further savings of up to 10% of the original annual contract value which will help ensure the Council can achieve the full level of savings required going forward in line with the Public Health Grant reduction.

### **5 Conclusions**

- 5.1 The recommended 2% reduction to the annual contract value with DISC for the Forward Leeds service will enable the Council to realise savings of £170,000 p.a. and ensure service continuity whilst a further review to identify savings of 10% against the original contract value, and which may involve changes to the model of delivery, can be completed.

## **6 Recommendations**

- 6.1 The Director of Public Health is recommended to approve a variation to the above contract with DISC in accordance with Contract Procedure Rule 21.7 to reduce the annual contract value by 2% with effect from 1 July 2016.

## **7 Background documents<sup>1</sup>**

- 7.1 Review and Commissioning of Drug and Alcohol Treatment and Recovery Services - a joint report of the Directors of Public Health, Children's Services, Environment and Housing, and Adult Social Services to Executive Board, 22 January 2014 which includes at Appendix 3 an in-depth Equality, Diversity, Cohesion and Integration Impact Assessment completed 22 November 2013.

The background documents listed in this section are available to download from the Council's website, unless they contain confidential or exempt information. The list of background documents does not include published works.

As a public authority we need to ensure that all our strategies, policies, service and functions, both current and proposed have given proper consideration to equality, diversity, cohesion and integration.

A **screening** process can help judge relevance and provides a record of both the **process** and **decision**. Screening should be a short, sharp exercise that determines relevance for all new and revised strategies, policies, services and functions. Completed at the earliest opportunity it will help to determine:

- the relevance of proposals and decisions to equality, diversity, cohesion and integration.
- whether or not equality, diversity, cohesion and integration is being/has already been considered, and
- whether or not it is necessary to carry out an impact assessment.

<b>Directorate: Public Health</b>	<b>Service area: Strategy &amp; Commissioning</b>
<b>Lead person: Helen Moran</b>	<b>Contact number: 0113 39 57576</b>

### 1. Title: Public health grant cut – Forward Leeds

Is this a:

☐

Strategy / Policy

☒

Service / Function

☐

Other

If other, please specify

### 2. Please provide a brief description of what you are screening

Forward Leeds is the Community Drug and Alcohol Prevention, Treatment and Recovery Service for adults, children and young people in Leeds (YORE-9F7N76) which is delivered by DISC in conjunction with four consortium partners (Barca, St Anne's, St Martin's Healthcare Services and Leeds and York Partnership Foundation Trust). It commenced on 1 July 2015 and replaced a number of previously commissioned drug and alcohol services in the city following the review and retendering of this provision in 2014.

Further to the recently announced reduction in Public Health Grant funding the Council intends to reduce the annual contract value of this service in 2016/17 by £170,000 from £8,499,730 to £8,329,730 which equates to a reduction of 2%.

Discussions have taken place with Forward Leeds on how the required savings can be achieved and the timescales for their implementation. This screening document considers the potential impact of these proposals.

### 3. Relevance to equality, diversity, cohesion and integration

All the council's strategies/policies, services/functions affect service users, employees or

the wider community – city wide or more local. These will also have a greater/lesser relevance to equality, diversity, cohesion and integration.

The following questions will help you to identify how relevant your proposals are.

When considering these questions think about age, carers, disability, gender reassignment, race, religion or belief, sex, sexual orientation. Also those areas that impact on or relate to equality: tackling poverty and improving health and well-being.

Questions	Yes	No
Is there an existing or likely differential impact for the different equality characteristics?		X
Have there been or likely to be any public concerns about the policy or proposal?		X
Could the proposal affect how our services, commissioning or procurement activities are organised, provided, located and by whom?	X	
Could the proposal affect our workforce or employment practices?		X
Does the proposal involve or will it have an impact on <ul style="list-style-type: none"> <li>Eliminating unlawful discrimination, victimisation and harassment</li> <li>Advancing equality of opportunity</li> <li>Fostering good relations</li> </ul>		X

If you have answered **no** to the questions above please complete **sections 6 and 7**

If you have answered **yes** to any of the above and;

- Believe you have already considered the impact on equality, diversity, cohesion and integration within your proposal please go to **section 4**.
- Are not already considering the impact on equality, diversity, cohesion and integration within your proposal please go to **section 5**.
- 

#### 4. Considering the impact on equality, diversity, cohesion and integration

If you can demonstrate you have considered how your proposals impact on equality, diversity, cohesion and integration you have carried out an impact assessment.

Please provide specific details for all three areas below (use the prompts for guidance).

• **How have you considered equality, diversity, cohesion and integration?**  
*(think about the scope of the proposal, who is likely to be affected, equality related information, gaps in information and plans to address, consultation and engagement activities (taken place or planned) with those likely to be affected)*

Prior to re-commissioning this service, a review of existing provision was undertaken and this involved in-depth consultation with a wide range of stakeholders including providers, service users, ward members and other services / agencies in the city. As a result the service was redesigned to broaden access and provision for all but with a particular emphasis on families, young people, those with mental health needs, homeless /at risk of homelessness or who may not have accessed traditional drug and alcohol provision.

Discussions have taken place with Forward Leeds regarding the reduction in contract value and an implementation plan has been developed which sets out how the savings



can be achieved. Consideration of the impact on service provision and service users has been part of this process.

- **Key findings**

*(think about any potential positive and negative impact on different equality characteristics, potential to promote strong and positive relationships between groups, potential to bring groups/communities into increased contact with each other, perception that the proposal could benefit one group at the expense of another)*

Forward Leeds has identified ways in which savings of 2% during 2016/17 can be achieved with minimal or no adverse or differential impact on different client / equality groups. This has been achieved primarily through identifying recurrent and non-recurrent savings, streamlining management structures and finding alternative ways of delivering provision :

- Each Forward Leeds partner has found recurrent and non-recurrent savings proportional to their share of the contract value. Recurrent savings are from reductions in travel, mobile phone and staff training expenditure and a reduction in locum and agency costs. Non-recurrent savings are from predicated vacancies and agreement not to fill part posts.
- A Reduction and Motivation Programme (RAMP), currently delivered through a service level agreement with an organisation called Acorn, will be delivered in-house by DISC who have the capacity to deliver a programme of comparable quality.
- Innovative ways of delivering and fundraising will help reduce costs for service user activities.
- The senior manager and lead practitioner roles for children and young people have been combined into a single role. The streamlining of these roles is not expected to impact on the maintenance and provision of an appropriate quality service to Children and Young people and has been achieved without redundancies. The frontline staffing is unaffected at this time.

Prior agreement between LCC and Forward Leeds, that implementation of the savings would take place from 1 July 2016 rather than the start of the financial year on 1 April 2016, has enabled a considered approach to be taken so as to minimise the impact on the accessibility and effectiveness of the service for different equality groups.

- **Actions**

*(think about how you will promote positive impact and remove/ reduce negative impact)*

As part of ongoing contract management arrangements, monitoring of service data will be undertaken to establish any impact on service performance and to ensure there is no adverse impact on access to the service and the outcomes for different equality groups. Wide ranging performance data is collated and reported to us by the Forward Leeds service on a regular basis including equality monitoring data, referral numbers and source, and successful completions and representations for different client groups e.g. young people, service users with children etc.

Where any adverse impact is identified, contract managers will work with the service to identify and implement appropriate measures to address the impact.

**5.** If you are **not** already considering the impact on equality, diversity, cohesion and

integration you <b>will need to carry out an impact assessment</b> .	
Date to scope and plan your impact assessment:	
Date to complete your impact assessment	
Lead person for your impact assessment (Include name and job title)	

<b>6. Governance, ownership and approval</b>		
Please state here who has approved the actions and outcomes of the screening		
<b>Name</b>	<b>Job title</b>	<b>Date</b>
Bridget Emery	Chief Officer, Strategy and Commissioning	22 June 2016
<b>Date screening completed</b>		22 June 2016

<b>7. Publishing</b>	
<p>Though <b>all</b> key decisions are required to give due regard to equality the council <b>only</b> publishes those related to <b>Executive Board, Full Council, Key Delegated Decisions</b> or a <b>Significant Operational Decision</b>.</p> <p>A copy of this equality screening should be attached as an appendix to the decision making report:</p> <ul style="list-style-type: none"> <li>• Governance Services will publish those relating to Executive Board and Full Council.</li> <li>• The appropriate directorate will publish those relating to Delegated Decisions and Significant Operational Decisions.</li> <li>• A copy of all other equality screenings that are not to be published should be sent to <a href="mailto:equalityteam@leeds.gov.uk">equalityteam@leeds.gov.uk</a> for record.</li> </ul> <p>Complete the appropriate section below with the date the report and attached screening was sent:</p>	
For Executive Board or Full Council – sent to <b>Governance Services</b>	Date sent:
For Delegated Decisions or Significant Operational Decisions – sent to appropriate <b>Directorate</b>	Date sent:
All other decisions – sent to <a href="mailto:equalityteam@leeds.gov.uk">equalityteam@leeds.gov.uk</a>	Date sent: