

Report

Date: 1st December 2020

To the Portfolio Holder for Public Health, Leisure and Culture

Development of an integrated model of adult substance misuse treatment and supported housing

Relevant Cabinet Member(s)	Wards Affected	Key Decision
Councillor Nigel Ball	All	Yes

1. EXECUTIVE SUMMARY

Adult substance misuse has many underlying causal factors, which can affect the likelihood and speed of developing an addiction. There is strong evidence of a mutually reinforcing relationship between homelessness and the risk of substance misuse amongst previously abstinent people whilst having a substance misuse related disorder also increases the risk that someone will become homeless.

This report outlines a proposal to change Doncaster Council's approach to commissioning, contracting and tendering for adult substance misuse, in order to improve service effectiveness and outcomes for clients or potential clients of adult substance misuse treatment and supported housing services.

The Council currently provides substance misuse services through two contracts.

In piloting a merger of these contracts, efficiencies in commissioning and contract management will be achieved for Doncaster Council, and better integrated, more person centred care delivered for clients.

During the proposed pilot of a merged integrated substance misuse service, a specification for Doncaster will be developed.

To achieve this, it is proposed that the supported housing contract will be subcontracted by the substance misuse treatment service and the merged contract be extended by one year with the integrated service being tendered in April 2023.

This report outlines the current arrangements which the Council has is place and also sets out the preferred option for the development of an integrated adult substance misuse and supported housing service.

EXEMPT REPORT

2. This is not an Exempt report.

RECOMMENDATIONS

- 3. To approve the approach to integration of adult substance misuse treatment and supported housing services by:
 - Merging the Aspire substance misuse treatment service and Riverside supported housing contract (Aspire to subcontract Riverside)
 - Extending the merged contract for 12 months to April 2023
 - Pilot and evaluate the merged service prior to developing an integrated specification for tender in April 2023

WHAT DOES THIS MEAN FOR THE CITIZENS OF DONCASTER?

4. By piloting an integrated service, Doncaster citizens who are clients or potential clients of substance misuse treatment and supported housing services would benefit from better-integrated care and improved opportunities for substance misuse recovery.

5. BACKGROUND

Current Model

Doncaster Council currently commissions two separate services for substance misuse:

Adult substance misuse treatment is provided by Aspire, a partnership between RDASH and the Alcohol and Drug Service. The services are delivered via a hub and spoke model within the centre in Doncaster town, and bases in Mexborough, Bentley and Stainforth. Inpatient treatment and structured outpatient treatment including prescribing and pharmacy services are delivered. The contract runs to 31 March 2022 with a value of £5 234 998 per annum.

Adult substance misuse supported housing services are provided by Riverside. The services provided are six flats at Garnham House, an abstinence based service where tenants are required to attend the Aspire structured day programme, and dispersed housing in eight properties across Doncaster, plus floating support for up to 70 people. The contract value is £310 833 per annum, with a Waiver approved to extend the contract to May 2021.

Proposed Model

The proposed model is to fully integrate both services as soon as possible by the services provided by Riverside being merged into the Aspire contract and then the merged service being provided by Riverside as a subcontractor arrangement with Aspire. A 10% (£31K approximately) management fee will be applied by Aspire for the management of the Riverside subcontract.

The management fee costs will cover:

- Legal
- Strategic management
- Contract management
- Finance management
- HR
- Central administrative support
- Marketing, graphic design, PR and Comms

The services will be provided to the same cohort so integration removes any potential or actual duplication. It also puts the person at the centre of service delivery, provides continuity of care and consistency of environmental factors that are very important to recovery.

An integrated model is in line with the corporate strategic commissioning agenda providing efficiencies in tendering, contracting and performance management.

The Aspire contract has an expiry date of 31st March 2022, therefore a oneyear extension to the Aspire contract will need to be put in place to allow the integrated service pilot to run until the 31st March 2023.

The proposed integrated model is untested in Doncaster. There are three known examples of similar models across the country that have been considered and the conclusion reached that there is a need to develop a Doncaster specific integrated specification.

By running a pilot until the 31 March 2023 allows the Council to test the specification and service delivery, to evaluate the success of the new integrated model in partnership with Aspire. This will allow the Council to undergo an open tender process and allow the appointed tenderer at the conclusion of the tender process a mobilisation period of 12 months with an integrated service commencement date 1st April 2023.

Next steps required

For the merger to be effective, a voluntary termination notice shall be served on Riverside to terminate this substance misuse contract.

Simultaneously, a variation will be made to the Aspire contract to vary this service to include the services provided under the Riverside contract; to permit Aspire to subcontract this element of the service to Riverside; to extend the Aspire contract term to 31st March 2023 and to set out a performance management framework with which to help shape and continuously evaluate the service through the pilot period.

Both Aspire and Riverside are in agreement with participating in this development and staff in the organisations have been informed.

OPTIONS CONSIDERED

6. Option 1 - Do nothing. This would mean the services will be delivered separately to the same cohort.

Option 2 - Pilot an integrated model and develop a specification to tender for an integrated service in 2023

REASONS FOR RECOMMENDED OPTION 2

7. An integrated model would deliver efficiencies for tendering and performance management within DMBC. There will be better continuity and quality of care for clients with the potential to reduce duplication.

IMPACT ON THE COUNCIL'S KEY OUTCOMES

8.		
	Outcomes	Implications
	 Doncaster Working: Our vision is for more people to be able to pursue their ambitions through work that gives them and Doncaster a brighter and prosperous future; Better access to good fulfilling work Doncaster businesses are supported to flourish Inward Investment 	Recovery from substance misuse will enable affected individuals to be successful in the world of work
	Doncaster Living: Our vision is for	People affected by substance

 Doncaster's people to live in a borough that is vibrant and full of opportunity, where people enjoy spending time; The town centres are the beating heart of Doncaster More people can live in a good quality, affordable home Healthy and Vibrant Communities through Physical Activity and Sport Everyone takes responsibility for keeping Doncaster Clean Building on our cultural, artistic and 	misuse will receive better support to enable them to sustain their tenancies
sporting heritage Doncaster Learning: Our vision is for learning that prepares all children, young people and adults for a life that	Recovery from substance misuse will enable adults to participate in adult learning opportunities
 Every child has life-changing learning experiences within and beyond school Many more great teachers work in Doncaster Schools that are good or better Learning in Doncaster prepares young people for the world of work 	
 Doncaster Caring: Our vision is for a borough that cares together for its most vulnerable residents; Children have the best start in life 	Better connected care which will benefit adults with substance misuse and their families
 Children have the best start in life Vulnerable families and individuals have support from someone they trust Older people can live well and independently in their own homes 	
 Connected Council: A modern, efficient and flexible workforce Modern, accessible customer interactions Operating within our resources and delivering value for money A co-ordinated, whole person, 	A whole person approach for affected people and efficiencies in tendering and performance managing services within DMBC

 aspirations of residents Building community resilience and self-reliance by connecting community assets and strengths Working with our partners and residents to provide effective leadership and governance
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RISKS AND ASSUMPTIONS

9. Risk Mitigation

There is a risk of procurement challenge of extending the pilot beyond the current expiry date of the Aspire contract. The Council should place an award notice within 30 days of the contract being extended.

Full records of decisions and actions on the individual contracts will be maintained in order to mitigate against the risk of successful legal challenge.

LEGAL IMPLICATIONS Officer Initials PC Date 16.10.20

- 10. Section 1 of the Localism Act 2011 provides the Council with a general power of competence, allowing the Council to do anything that individuals generally may do.
- 11. Section 111 of the Local Government Act 1972 gives the Council the power to purchase goods and services.
- 12. Section 2B of the National Health Service Act 2006 (as amended by Section 12 of the Health and Social Care Act 2012) introduced a duty on Councils in England to take appropriate steps to improve the health of the people who live in their area.
- 13. In respect of the initial modification of the Aspire contract to include within it the Riverside Service, the Public Contracts Regulations 2015 permits modifications of contracts without a new procurement procedure where the value of the modification is both below the EU Light Touch Threshold for Services (currently £663,540) and 10% of the initial contract value, provided that the modification does not alter the overall nature of the contract. This criterion is met. The variation should include within it the requirement for Aspire to sub-contract this additional service to Riverside and to co-operate fully with the proposed pilot project to develop a new Doncaster integrated service specification. It should be noted that the Riverside contract has a voluntary termination provision within it that permits termination by the Council upon six months' notice.

- 14. In respect of the modification to extend the term of the Aspire contact to 31st March 2023 after commencement of the pilot project. Regulation 72 permits modifications without a new procurement procedure for additional services by the original contractor that have become necessary and were not included in the initial procurement.
- 15. Such circumstances include where a change of contractor cannot be made technical reasons (such as for economic or requirements of interchangeability or interoperability with existing services or installations procured under the initial procurement) and would cause significant inconvenience or substantial duplication of cost for the contracting authority provided that any increase in price does not exceed 50% of the value of the original contract.
- 17. Regulation 32 of the Public Contracts Regulations 2015 also permits the award of a public services contract without prior advertisement in OJEU by use of the negotiated procedure where the services can only be supplied by a particular economic operator where competition is absent for technical reasons but only where no reasonable alternative or substitute exists and the absence of competition is not the result of an artificial narrowing down of the parameters of the procurement.
- 18. Piloting a new way of providing services during the period of a newly merged contract would cause significant inconvenience and cost if the council needed to break off and procure a new contractor. Further, it is understood that systems in the pilot will not be easily merged with different systems provided by a new supplier, which would be counterproductive. It is noted that additional value to the Aspire contract as a result of the extension would not exceed 50% of the original Aspire contract value.
- 19. Legal Services should be consulted to draft the necessary contractual documentation and upon the content of the Contract Award Notice which should be published within 30 days of awarding the extension.
- 20. The Equality Act 2010 requires the decision maker to comply with the public sector equality duty to consider the need to promote equality for persons with "protected characteristics": age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex, sexual orientation and have due regard to:
 - i) eliminate discrimination, harassment, and victimisation;
 - ii) advance equality of opportunity;
 - iii) foster good relations between persons who share a relevant protected characteristic and those who do not share it.
- 22. In order to do this the decision maker will need to have sufficient information about the effects of the proposed changes on the aims of the equality duty. The Equalities Implication section (paragraph 27 below) is designed to assist with compliance with this duty and so the decision maker must take that into consideration and the public sector equality duty before taking the decision.

FINANCIAL IMPLICATIONS NC/HR 15/10/2020

23. The Council has not yet received notification of Public Health grants beyond the current financial year. In 2020/21 the Council received a ring fenced Public Health grant of circa £24m to tackle health inequalities in the borough. The Substance Misuse contract has an annual budget of £5.235m which is fully funded from this grant.

The Supporting People budgets have £310k allocated against the Riverside substance misuse contract. This budget is funded via the Public Health realigned budget arrangements, which forms part of the £24m Public Health grant. The 10% (£31K approximately) management fee will be applied by Aspire for the management of the Riverside subcontract. The Director of Public Health has confirmed that this can be met from the under spend on the Supporting People budget which is also funded from the realigned Public Health grant.

HUMAN RESOURCES IMPLICATIONS [Officer Initials EL Date 28/10/20]

24. There are no direct HR implications in relation to this report.

TECHNOLOGY IMPLICATIONS [Officer Initials...PW Date...14/10/20]

25. There are no anticipated technology implications in relation to this report.

HEALTH IMPLICATIONS [Officer Initials...HC..Date ...01/10/20.....]

26. This proposal will have positive effects on the health and wellbeing of clients of adult substance misuse treatment and supported housing services and their families.

EQUALITY IMPLICATIONS [Officer Initials...HC Date...01/10/20......]

27. A due regard statement, which accompanies this report has been completed and identifies there will be neutral impact on people with protected characteristics.

CONSULTATION

28. A full stakeholder consultation on benefits realised by the integrated model will be conducted during the tender preparation phase of this proposal.

BACKGROUND PAPERS

29. Due Regard Statement

GLOSSARY OF ACRONYMS AND ABBREVIATIONS

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EQUALITY, DIVERSITY AND INCLUSION

DONCASTER METROPLITAN BOROUGH COUNCIL

Due Regard Statement; Integration of adult substance misuse treatment and supported housing services.

How to show due regard to the equality duty in how we develop our work and in our decision making.

Due Regard Statement

A **Due Regard Statement** (DRS) is the tool for capturing the evidence to demonstrate that due regard has been shown when the council plans and delivers its functions. A Due Regard Statement must be completed for all programmes, projects and changes to service delivery.

- A DRS should be initiated at the beginning of the programme, project or change to inform project planning
- The DRS runs adjacent to the programme, project or change and is reviewed and completed at the relevant points
- Any reports produced needs to reference "Due Regard" in the main body of the report and the DRS should be attached as an appendix
- The DRS cannot be fully completed until the programme, project or change is delivered.

1	Name of the 'policy' and briefly describe the activity being considered including aims and expected outcomes. This will help to determine how relevant the 'policy' is to equality.	The Local Authority based Public Health is responsible for commissioning drug and alcohol services (Aspire via RDasH and ADS). This provides a platform for a more integrated approach to improving public health outcomes. This approach addresses the root causes and wider determinants of drug dependence and alcohol misuse and the harm and impact they have on communities and troubled families (such as mental health, employment, education, crime and housing). It also delivers the greatest gains for individuals and the community.
		Doncaster Public Health and the Adults Strategic Commissioning Team have worked together to devise an integrated supporting people and drug & alcohol service model for Doncaster.
		The service (Riverside) consists of holistic accommodation and floating support provision ensuring that there is a clear defined pathway for all service users accessing alcohol and substance misuse support across the system. The service provides accommodation and floating support for people with alcohol and substance misuse issues and, in particular, but not limited to, housing needs.
		Benefits of the proposed integration:
		Services provided to same cohort so removes potential or actual duplication
		Puts person at centre of service delivery
		Environmental factors are very important to recovery
		Continuity of care
		In line with the corporate strategic commissioning agenda
		The proposal is to merge the substance misuse treatment and supported housing services and for Aspire to deliver subcontracted provision using Riverside for a pilot period.
		Pilot period to commence a.s.a.p. prior to expiry of the current Aspire contact term (March 2022).

2	Service area responsible for completing this statement.	Public Health and Strategic Commissioning
3	Summary of the information considered across the protected groups.	As of November 2019 Aspire currently has 1,116 clients receiving structured treatment and 557 non structured clients across the Borough of Doncaster. The service has hubs in strategically placed parts of Doncaster based on need
	Service users/residents	placed parts of Doncaster based on need, Bentley with 122 clients, Mexborough with 170, Thorne 111, a central base in Doncaster town centre with 484, criminal justice clients of 208 and New Beginnings 21. Aspire also has a dedicated midwife who currently is working with 9 clients. According to the National Drug Treatment Monitoring System, in the period 1 st of April to 30 th of September 2019 males made up 68.5% of clients and females 31.5%. Between the ages of 18 to 40 years of age there are 41.1% of clients identified as White/British, 94% Heterosexual, 1.7% Gay/Lesbian, 1.7% Bi- Sexual, 2.5% missing/not stated. Between the period 1 st of April to 30 th of September there were 234 clients starting new treatment of which 85% of clients stated no disability. 66% stated no religion and 23% Christian, 1.8% Muslim/Sikh/Buddhist and 7.3% stated other. This data is monitored on a regular basis by commissioners via NDTMS and yearly by PHE Commissioning Support Packs <i>Impact on Protected characteristics</i> Age - No change to criteria for the service. The service is open to adults over 18. Disability - Within the new model there is provision for specialist roles within physical and mental health specialties. This should enable people with disabilities to have more support with regards to their substance misuse and co existing condition. Gender Reassignment - The service redesign will continue to offer services irrespective of gender. Marriage and Civil Partnership - The service redesign will continue to offer services irrespective of marriage or civil partnership status. Pregnancy and Maternity - Individuals who are pregnant would be considered high risk and continue to be supported with a named keyworker. There are pathways already

4	Summary of the consultation/engagement activities	established between DBTH and the Community Midwifery service for people who are vulnerable. Race - The service redesign will continue to offer services irrespective of race. Religion or Belief - The service redesign will continue to offer services irrespective of religion or belief. Sex - Dedicated Rooms and consideration are built into the environmental factors at New Beginnings as well as gender specific groups delivered by a mixed sex workforce. Sexual Orientation - The service redesign will continue to offer services irrespective of sexual orientation. Disadvantaged Groups - Aspire has recognised the value of an outreach / inreach provision to work across vulnerabilities and other settings e.g. hostels or where a clinic based approach does not meet needs. Service users would not be impacted by the change as the provider and services they receive will remain unchanged.
	activities	A stakeholder consultation on the impact and effectiveness of the model will be undertaken during the tender preparation process after September 2021
5	Real Consideration: Summary of what the evidence shows and how has it been used	The concept of recovery capital is fundamental in increasing the chances of an individual achieving long term sustainable recovery. The components of recovery capital are social, physical, human and cultural. Physical capital includes assets such as stable employment and secure housing.
		The current service offers practical and emotional support, as well as assistance and advice for clients to maintain their tenancies and move forward in their recovery. The benefits of this proposal will remove any duplication and strengthen the pathway between the two services for clients.
		This proposed integrated model is untested in Doncaster and no other similar examples across the country, therefore there is a need to develop a local Doncaster specification.

6	Decision Making	This is a key decision to be taken by Councillor Nigel Ball and this Due Regard Statement, the consultation findings and a Corporate Report will be presented to Directors and Executive Board.
7	Monitoring and Review	Monthly commissioner/provider meetings are scheduled with Aspire and Public Health commissioners to review progress against key performance indicators. Quarterly contract meetings also take place for the Rdash/Aspire contract.
8	Sign off and approval for publication	Dr Rupert Suckling Director of Public Health