

Doncaster Council

Report

Date: 14 / 06 / 2022

To: Councillor Nigel Ball, Cabinet Member for Public Health, Leisure, Culture and Planning

Doncaster Led Inpatient Detoxification Consortium 22/23

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

EXECUTIVE SUMMARY

- 1. On 11/03/21 Doncaster Council was invited by Public Health England to submit a grant application for a Section 31 local authority grant for inpatient detoxification 2021/22 of £853,064, as lead local authority/banker on behalf of a consortium of 11 local authorities in the Yorkshire and Humber region, namely:
 - Doncaster
 - Hull
 - North East Lincolnshire
 - North Lincolnshire
 - East Riding of Yorkshire
 - Wakefield
 - Rotherham
 - Kirklees
 - Bradford
 - York
 - Sheffield
- 2. Pursuant to this, and following the special urgency key decision taken by the Mayor on 12/04/21 for Doncaster Council to act as lead local authority for the consortium, the Public Health Team conducted a tender, and Chapman Barker

Unit Manchester (a Greater Manchester Mental Health NHS Foundation Trust Service) and New Beginnings, Doncaster (an RDaSH / Aspire Drug and Alcohol Service) were appointed as inpatient detoxification providers for the consortium. Provision to patients has continued in 21/22.

- 3. All consortium member Local Authorities have been notified by the Office of Health Improvement and Disparities (OHID) that there will be a 22/23 allocation at the same level as the 21/22 amount (£853,064 per annum), and the consortium wishes to continue to function under current arrangements during 22/23.
- 4. We have been asked by OHID to submit outline plans for 2023/24 and 24/25, at the same level of funding per annum. The consortium wishes to continue in its current composition during this period.
- 5. The consortium is supportive of utilising the 6 month contract extension available in the contact for the Inpatient Detoxification providers through to 31/12/22. Prior to contract expiry, it is intended that DMBC key decision processes will be revisited with an updated corporate report in November 2022 with a preferred recommended option of either retendering, further extending the contracts or directly awarding to current providers subject to implementation of the Provider Selection Regime under the Health and Care Act 2022. When the New Beginnings contract is extended it is also proposed to vary this contract to appoint a referral co-ordinator for the consortium employed by Rotherham Doncaster and South Humber NHS Foundation Trust at a cost of £33,224 to 31 March 2023.
- 6. The remainder of the allocation £819,840 for 22/23 will be used to fund inpatient detoxification placements at the two appointed providers.

EXEMPT REPORT

7. No.

RECOMMENDATIONS

- 8. That Councillor Nigel Ball
 - Approves the receipt of the Section 31 local authority grant for additional inpatient detoxification activity in 2022/23 to 2024/25 for Doncaster and the other 10 Authorities
 - Approves DMBC continuing to act as lead local authority on behalf of the consortium of 11 Local Authorities
 - Approves the use of the grant to improve treatment capacity and pathways for inpatient detoxification as outlined in the grant conditions.
 - Delegates to the Director of Public Health in consultation with the Director of Corporate Resources and the Portfolio Holder for Public

Health future decision making regarding the inpatient detoxification grant.

- Deploy the resources for: Consortium referral co-ordinator per annum £33,224 Inpatient detoxification placements per annum £819,840
- Receives an updated corporate report with recommendations for a preferred option for the future continuity of provision in November 2022

WHAT DOES THIS MEAN FOR THE CITIZENS OF DONCASTER?

9. Improved responses to substance misuse clients will improve the health of these clients, and contribute to the reduction in acquisitive and violent crime experienced by Doncaster citizens.

BACKGROUND

10. Prior to establishment of the consortium there were a variety of local models of spot purchasing used for a range of medically managed and medically monitored beds. Numbers treated, and wait times by local authority varied widely. The consortium block contracting allows greater stability for the Inpatient Provider sector, and has proved effective during 21/22. Greater access to provision for clients has also been achieved.

OPTIONS CONSIDERED

11. A. Do nothing: Doncaster would lose a significant funding opportunity.

B. Submit an application to utilise the £853,065 allocation for improving inpatient detoxification treatment and treatment pathways in accordance with the terms of the grant.

REASONS FOR RECOMMENDED OPTION

12. Utilisation of the grant will improve treatment and treatment pathways for alcohol and drug users and benefit the citizens of Doncaster in terms of reducing acquisitive and violent crime and health harms.

IMPACT ON THE COUNCIL'S KEY OUTCOMES

13.

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;	none	
 Better access to good fulfilling work Doncaster businesses are supported to flourish 		

Inward Investment	
 Doncaster Living: Our vision is for 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 Community through Physical Activity and S Everyone takes responsibility for keeping Doncaster Clean Building on our cultural, artistic sporting heritage 	ng lies port or
 Doncaster Learning: Our vision is learning that prepares all children, young people and adults for a life is fulfilling; Every child has life-changing learning experiences within and beyond school Many more great teachers worn Doncaster Schools that are good better Learning in Doncaster prepared young people for the world of word school 	, that d k in od or s
 Doncaster Caring: Our vision is f borough that cares together for its most vulnerable residents; Children have the best start in Vulnerable families and individ have support from someone th trust Older people can live well and independently in their own hom 	Health of substance misuse clients is improved and there is a reduction of offending behaviour related to drug and alcohol use in the community
Connected Council: A modern, efficient and flexible workforce	Grant allocation will contribute to operating with our resources and delivering value for money.

•	 Modern, accessible customer interactions Operating within our resources and delivering value for money A co-ordinated, whole person, whole life focus on the needs and 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 	

RISKS AND ASSUMPTIONS

- 14. Strong partnership working arrangements developed during 21/22 are in place with the local authority consortium members which will ensure grant criteria and timescales are met.
- 15. The forthcoming corporate report in November 2022 will be submitted in a timely manner so that continuity of provision is ensured.

LEGAL IMPLICATIONS [Officer Initials P Col Date 18/05/2022]

- 16. Section 1 of the Localism Act 2011 gives the Council a general power of competence to do anything that individuals may generally do. Section 111 of the Local Government Act 1972 gives the Council the power to purchase goods and services.
- 17. 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 to take appropriate steps to improve the health of the people who live in their area.
- 18. It is the proposed that OHID shall pay to the Council, under Section 31 of the Local Government Act 2003, the additional sum of £853,064 per annum for 22/23 for inpatient detoxification services. The grant is to be paid to Doncaster as the lead authority acting upon behalf of a consortium of 11 consortium local authorities in the Yorkshire and Humber region.
- 19. Doncaster Council, as lead authority, will be required to enter into a further legally binding grant agreement with OHID. Although the terms of that grant agreement have not yet been seen, it is likely that as for the 20/21 grant, they will include certain terms as to how the grant should be spent, reporting,

procurement of services etc. Failure to comply with the terms of the grant agreement may lead to claw back of the grant funding.

- 20. As lead authority, Doncaster Council already has in place with the 10 consortium members, a Consortium Agreement documenting the arrangements to date, obligating each member of the consortium to comply with the terms of the previous grant agreement, to flow down any risks and to enforce any clawback provisions if required. The Consortium Agreement will need to be extended to include the proposed extended grant arrangements.
- 21. Doncaster will be responsible for commissioning of additional inpatient alcohol and drug detoxification provisions for the consortium. The commissioning of these services must be made in accordance with the Doncaster's Contract Procurement Rules and the Public Contracts Regulations 2015.
- 22. It is the intention that the existing Provider Agreements be extended by utilising the existing six- month extension provision provided for within the Agreements from June to November 2022. The Agreements shall also be varied to capture the additional grant funding spend for a six month period (circa £426,523), in addition to the appointment of a referral co-ordinator for the consortium to be employed by Rotherham Doncaster and South Humber NHS Foundation Trust at a cost of £33,224 to 31 March 2023.
- 23. Such modifications are permissible under the Public Contract Regulations 2015 under Regulation 72 as the extended term is expressly provided for and the through put of additional funding from June to November 2022 is not considered substantial within the meaning of Regulation 72(8): amongst meeting other criteria, it does not render the contracts materially different in character from those initially concluded, nor is the scope extended considerably and it does not change the economic balance in favour of the providers in a way that was not provided for in the initial contracts.
- 24. The Health and Care Act 2022 contains a new Provider Selection Regime: a new set of rules replacing the existing procurement rules for arranging healthcare services in England. The rules are expected to be implemented in August 2022. Subject to certain criteria being met they are to permit a choice between i) the continuation of existing service arrangements ii) identifying the most suitable provider or iii) a competitive procurement. A further corporate report is to be submitted in November 2022 to consider future arrangements.
- 25. Further legal advice and assistance will be given as the scheme progresses.

FINANCIAL IMPLICATIONS [Officer Initials HR Date 18/05/2022]

26. Doncaster Council have been notified of the continuation of the Inpatient Detoxification Grant for a further three years commencing April 2022 – March 2025 at £853k per annum. A memorandum of understanding is expected to reconfirm the allocations along with outlining the conditions of the grant. As per Financial Procedure rule E.9 grant acceptance is subject to key decision rules,

approval for receipt of this funding is therefore included in the recommendations.

- 27. It is expected that the conditions of the grant will be the same as the 2021/22 allocation and will be expected to be spent per the plan submitted and within the relevant financial year. Quarterly returns are also expected to be a condition of the funding.
- 28. As lead authority Doncaster Council will act as banker for the consortium and will incur expenses on behalf of them, funding will not directly pass to the members. The Consortium Referral Co-ordinator post will be employed by RDASH and will invoice the Council for the cost of this post which will be paid from the Grant. The annual cost of the post is circa £41k, with just 9 months costs in 2022/23. The remaining grant will be used to fund detoxification placement costs for the consortium members including Doncaster.

HUMAN RESOURCES IMPLICATIONS [Officer Initials EL Date 19/05/2022]

- 29. There are no direct HR implications in relation to this report.
- TECHNOLOGY IMPLICATIONS [Officer Initials PW Date 16/05/2022]
- 30. There are no anticipated technology implications related to this report.
- HEALTH IMPLICATIONS [Officer Initials HC Date 11/05/2022]
- 31. The service improvement plans will have a positive effect on the health of substance misuse clients and help reduce drug related deaths, offending behaviour and the subsequent impact on the community.

EQUALITY IMPLICATIONS [Officer Initials HC Date 11/05/2022]

32. The equality implications for substance misuse clients as a result of deploying this allocation are positive as this group suffers significant health Inequalities.

CONSULTATION

33. All local authority consortium members, Inpatient detoxification providers and respective community treatment teams have been consulted during regular consortium meetings throughout 21/22. Capturing patient experience is a key performance indicator for the provision. A series of community based consultations with service users are planned during 2022 as part of a full service review.

BACKGROUND PAPERS

34. Rule 16 Special Urgency Key Decision taken by Mayor Ros Jones on 12th April 2021 – Re. 'One Year Allocation of Funds from Public Health England to

Doncaster as lead Local Authority/Banker, on behalf of 11 Local Authorities in Yorkshire and the Humber, for Inpatient Detoxification.'

https://doncaster.moderngov.co.uk/mglssueHistoryHome.aspx?IId=17381&Op t=0

GLOSSARY OF ACRONYMS AND ABBREVIATIONS

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