

Although a formal committee of Brighton & Hove City Council, the Health & Wellbeing Board has a remit which includes matters relating to the Clinical Commissioning Group (CCG), the Local Safeguarding Board for Children and Adults and Healthwatch.

Title: Re-commissioning Substance Misuse Services

Date of Meeting: 29th January 2019

Report of: Executive Director of Health & Adult Social Care

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Wards Affected: All

FOR GENERAL RELEASE

Executive Summary

This paper describes the problem of substance misuse in the City and the services that are in place to address drug and alcohol addiction. The paper seeks approval from the Health and Wellbeing Board to undertake procurement by tender for these services and requests delegated authority for the Executive Director of HASC to award a new contract at the end of the current contract.

Glossary of Terms

NHS - National Health Service

A&E – Accident and Emergency

RSCH – Royal Sussex County Hospital

HASC – Health & Adult Social Care

JSNA – Joint Strategic Needs Assessment



1. Decisions, recommendations and any options

- 1.1 The purpose of this report is to seek approval from the Health and Wellbeing Board for procurement by tender for substance misuse services.
- 1.2 That the Board grants delegated authority to the Executive Director of Health & Adult Social Care (HASC) to undertake the procurement and award of a contract for substance misuse services with a term of five years.
- 1.3 That the board delegates authority to the Executive Director of HASC to extend the contract at the end of the five year term for a further period of up to two years if it is deemed appropriate and subject to available budget.

2. Relevant information

- 2.1 Drug and alcohol misuse continues to be a significant issue in Brighton and Hove, including drug-related deaths. It is estimated that in 2014-15 there were 2,128 heroin and/or crack cocaine users in Brighton and Hove. During the financial year 2017/18 there were over 1,500 residents accessing drug treatment in the City. For 61% of these clients this was due to the primary use of heroin and about 36% of these clients had been in treatment for 6 years or longer.
- 2.2 The most recent (2018) estimates of alcohol dependence suggest there are 4,341 dependent drinkers in the City. Brighton and Hove has an estimated rate of 1.84% (compared to England at 1.35%) which places the City 21st highest out of 151 local authorities in England. Brighton and Hove ranks the 4th highest of 152 local authorities for the proportion of adults drinking at increasing or higher risk levels. In 2017/18 over 600 residents accessed treatment for alcohol dependence in the City.
- 2.3 During 2017 there was an average of 17.1 attendances at the Royal Sussex County Hospital A&E department each month related to 'drug addiction'. It is likely that this represents an under reporting of activity. Although there has been a fall in alcohol related A&E admissions at the RSCH, alcohol specific hospital admissions continue to be higher in Brighton and Hove than in England. The cost of A&E attendance and hospital admissions is high.
- 2.4 The costs to Brighton and Hove of alcohol misuse are estimated at £107 million per year: £10.7 million due to the health impact £24.5 million due to economic effects and £71.8 million as a result of anti-social behaviour and violence in the City.
- 2.5 The impact of drug and alcohol misuse on the community is also significant including drug litter and anti-social behaviour. There is often an impact on housing, and significant numbers of people within the integrated support



pathway have substance misuse issues. Across the band 2 (24 hour hostel accommodation) and band 3 (supported accommodation) supported housing there is high self-reported need amongst residents of managing a substance misuse problem. Eighty seven per cent of Glenwood Lodge residents report needs, 85% in West Pier Project hostel and 57% in band 3 (all supported housing provision for single homeless clients).

2.6 Local authorities assumed the responsibility for commissioning substance misuse services as part of the transfer of the public health function to local authorities from the NHS in 2013. Under the HSC Act 2012, local authorities have the duty to reduce health inequalities and improve the health of their local population by ensuring that there are public health services aimed at reducing drug and alcohol misuse. The ring-fenced grant – with attached conditions – currently supports local authorities in the discharge of these responsibilities. The 2015/16 public health grant included a new condition that requires:

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..."

2.7 The current provision of community substance misuse services is an integrated model for both drugs and alcohol treatment services. The service is provided by the Pavilions partnership of organisations with Cranstoun as the lead provider.

Cranstoun sub-contracts to:

- Surrey and Borders Partnership NHS Foundation Trust (SABP) to provide the medical element of the service
- Equinox to provide street outreach and antisocial behaviour work
- Brighton Oasis Project to provide women only interventions
- Cascade Recovery Café receives a grant to run the café and associated recovery activities.
- 2.8 The current contract was awarded, following procurement by tender, for the three years April 2015 to March 2018. Subsequently the contract was extended for a further two years contingent on a reduction in the contract value and is now due to end 31st March 2020.
- 2.9 In April 2016, the scope of the contract was extended to include an inpatient detoxification service following the closure of the local in-patient service. The detoxification beds are provided at the Cranstoun City Roads unit in London. The service performs well and the proportion of clients successfully completing detox consistently exceeds the target.
- 2.10 The Pavilions service performs well with some indicators being in the top quartile of our comparator providers. There are no concerns about the delivery and effectiveness of this service. The proportion of clients successfully completing treatment is high and there are relatively low numbers



representing within 6 months. Further detail on service activity and performance is included as an appendix to this report.

2.11 The most recent JSNA for substance misuse predicts future need is for the continuation of 'recovery-oriented' services ensuring that after care/post successful completion, services remain available to support people to stay in recovery. This should include a focus on health and wellbeing services, alongside employment, training and housing support.

3. Important considerations and implications

3.1 Legal:

The Council's Contract Standing Orders require that authority to enter into a contract valued at £500,000 or more be obtained from the relevant committee which in this case is the Health and Wellbeing Board.

The proposed contract falls within schedule 3 of the Public Contracts Regulations 2015 and is therefore classed as Light Touch. The value of the contract exceeds the threshold above which Light Touch Contracts are required to be advertised in the Official Journal of the European Union. Therefore a Prior Information Notice or a Contract Notice must be published setting out the process by which it is intended to award the contract.

The tender process must be conducted so as to ensure compliance with the principles of transparency and equal treatment of economic operators bidding for the contract.

Lawyer consulted: Judith Fisher Date: 19/12/18

3.4 Finance:

The 2018/19 budget allocated for the drugs and alcohol service from the ringfenced Public Health grant will be approximately £4.7m including the inpatient detoxification service.

Savings agreed for the current contract in previous budgets included a planned reduction of £0.339m for the community service. This saving is being realised as part of the re-procurement from 2020/21. This reduction has been temporarily covered across the Directorate in the interim. The anticipated ongoing annual budget for the new commissioned service is £4.109m. The budget of £0.250m for the inpatient detoxification service remains the same. Total annual budget from 2020/21 is £4.359 million.

Finance Officer consulted: David Ellis Date: 15/01/19



3.5 Equalities:

An equalities impact assessment (EIA) is currently underway for the recommissioning of substance misuse services and is due to be completed during January 2019. The commissioner will take any findings into account and build in any actions identified from the EIA into the procurement process and in any ongoing service provision

Equalities Officer consulted: Anna Spragg Date: 19/12/18

3.6 Sustainability:

Included in the body of the report

Supporting documents and information

Appendix 1: Substance misuse service performance summary

