

AGENDA ITEM No: 8

**CAMBRIDGESHIRE YOUNG PEOPLE'S DRUG AND ALCOHOL SERVICES
PROCUREMENT**

To: **Health Committee**

Meeting Date: **May 17th 2018**

From: **Director of Public Health**

Electoral division(s): **All**

Forward Plan ref: **Key Decision**

No

Purpose: The paper describes the rationale and benefits of procuring Cambridgeshire Young People's Drug and Alcohol Treatment Service through a competitive tender.

Recommendation: The Health Committee is asked to approve the following

- a) Initiating a competitive tender for the procurement of a Cambridgeshire integrated Young People's drug and alcohol service.
- b) The scope of service to be included in the tender.
- c) A transformation approach that reflects the findings of the recent Drugs and Alcohol Joint Strategic Needs Assessment and the National Drugs Strategy, is evidence based and provides value for money.
- d) Increased integration with other young people's services to provide both universal prevention and a targeted approach for 'at risk' and vulnerable young people.

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1. BACKGROUND

- 1.1 Young People's Drug and Alcohol specialist treatment provision across Cambridgeshire falls under two separate arrangements. The primary young people's contract is provided by Cambridgeshire and Peterborough Foundation Trust (CPFT) and the service is referred to locally as CASUS. The second element to the service is the specialist substance misuse Youth Offending provision which is provided by Cambridgeshire County Council and forms part of the wider Youth Offending Service (YOS).
- 1.2 Both elements of the service work closely together. The current service model has been in place since 2013 and provides prevention, early help, targeted interventions for 'at risk' groups and specialist clinical treatment provision for young people across Cambridgeshire. The service is closely aligned with CAMH and the current team includes a child and adolescent psychiatrist.
- 1.3 Drug and alcohol prevention and treatment services are included in local authority public health commissioning categories that fall under the Public Health grant. The services are not specifically mandated, as mandated services are generally those which central government wants to be delivered in a standard way across the country. However, the public health grant conditions include the following statement: 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..."
- 1.4 Historically the commissioning was undertaken by the Drug and Alcohol Team (DAAT) that sat in the former Children, Families and Adults Directorate, although the services are funded from the Public Health Grant. The recent creation of the Cambridgeshire and Peterborough Public Health Joint Commissioning Unit (JCU) has brought together the majority of public health services that are commissioned, including Drugs and Alcohol Services.
- 1.5 Both contractual arrangements will shortly expire, the CASUS contract commenced on 1st April 2013 and is due to terminate on the 31st March 2019. The YOS contractual arrangement is reviewed on an annual basis. It is proposed to formally commence the procurement in June 2018 after securing support from the Health Committee, which has responsibility for the Council's public health services and policies. Contract award is planned for November, 2018 with a contract start date of the 1st April, 2019.

2. MAIN ISSUES

- 2.1 There are far ranging effects upon the physical and mental health of those young people who are affected by the misuse of drugs and alcohol. These effects also have a significant impact upon individuals, families, communities and across wider society which are captured in Figures 1 and 2.

Figure 1: The prevalence of drug and alcohol harm for families

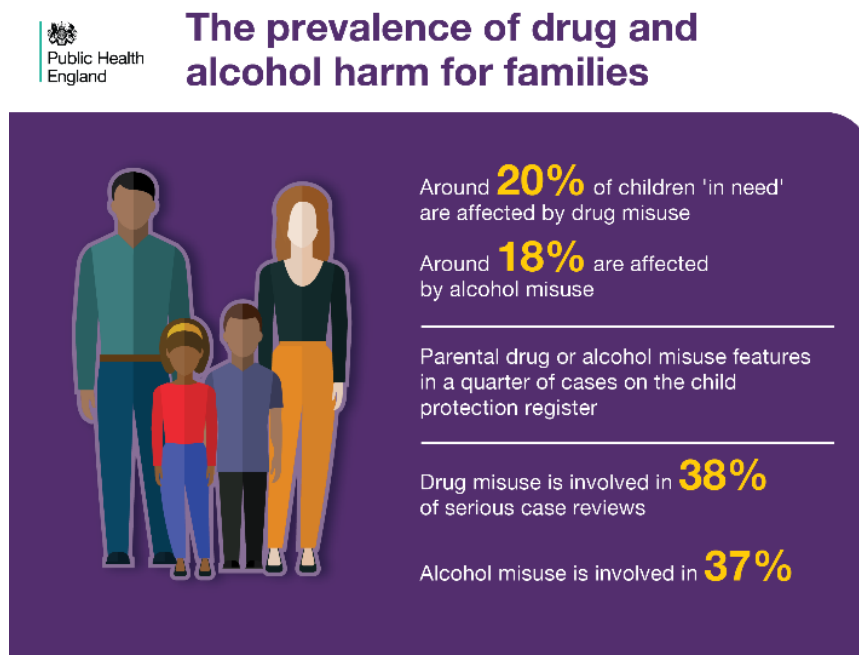


Figure 2: The impact of drug & alcohol misuse on families



- 2.2 The central objective of young people's drug and alcohol services is to prevent young people continuing to misuse drugs and alcohol as they enter into adulthood.

Problematic substance use remains symptomatic of difficulties facing young people. Some young people are particularly vulnerable to substance misuse including young offenders, those with poor mental and emotional health, those

who have experienced parental substance misuse, those experiencing child sexual exploitation and abuse. Specialist young people's substance misuse services play a pivotal role in delivering and coordinating a multi-agency response, accurately assessing and meeting need to ensure that young people are heard and protected.

The development of specialist services for young people need to reflect the intrinsic differences between adults and children and between children of different ages. In addition young people's substance misuse is changing both in terms of reported prevalence and complexity of the problems faced by young people who use specialist services. It is important that services are able to reflect this changing landscape of need.

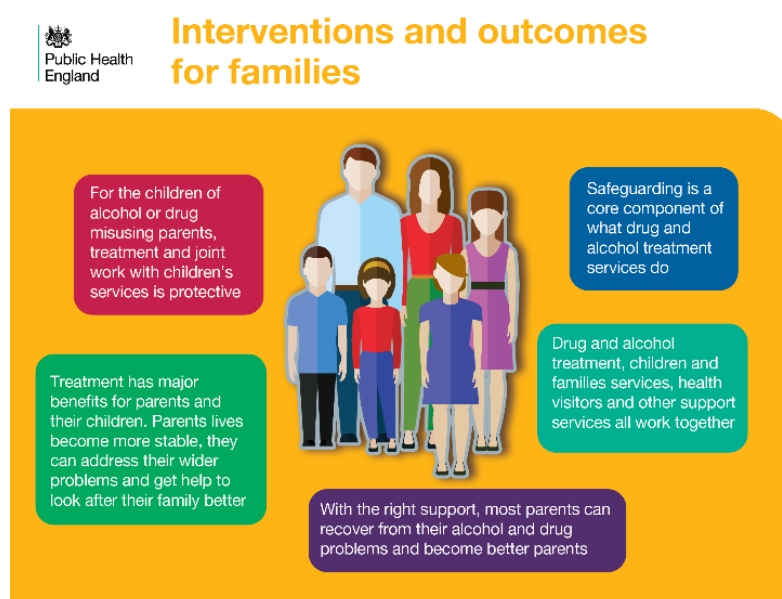
- 2.3 Evidence based treatment and recovery services are essential to motivate and support people with drug and alcohol problems. They should provide a range of interventions, according to the level and type of dependency and an individual's assessed need (See Figure 3)

Figure 3: Specialist treatment and recovery



- 2.4 Partnership work between treatment services and local children's health and social care agencies is crucial. Parental drug and alcohol treatment can be a protective factor for children and can enable parents to engage with support agencies (See Figure 4).

Figure 4: Interventions and outcomes for families



2.5 In addition there are socio-economic costs to society and services, which include health services, social care, the criminal justice system, employers and housing services. The harms of drug and alcohol misuse have been modelled to show the costs of treatment and addressing them. (Figures 5, 6 & 7)

Figure 5: Annual cost of drug misuse and alcohol related harm



Figure 6: Specialist interventions for young people-savings

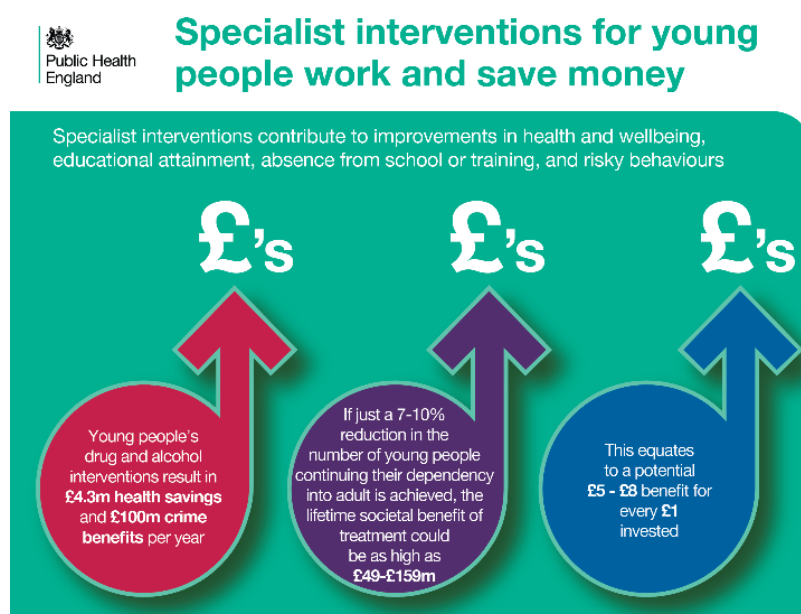


Figure 7: Investing in drug & alcohol treatment-savings



- 2.6 Only the Cambridgeshire Children and Young People's Specialist Drug and Alcohol Treatment services are in scope. The Peterborough treatment contracts were let in 2015/16 with its new integrated treatment service (young people and adult) commencing on the 1st April 2016 and the Cambridgeshire Specialist Adult Drug and Alcohol treatment service contract is currently in the latter stage of procurement with contract award planned for 1 June, 2018.

Going forward, break clauses in the new Cambridgeshire contracts (Adult and Young People) will be aligned with Peterborough's contract to provide future options for integration across both geographical areas.

The YOS element of the service is currently in scope and will be included in the comprehensive pre-tender evaluation work, the findings of which will help inform a future delivery model.

The scope includes exploring the evidence for increasing the integration of the Children and Young People's Drug and Alcohol services with other related children and young people's services and will include consideration of different service and commissioning models which will include the following.

1. Aligning or embedding within the 0-19 Children and Young People's pathway.
2. Integration within other child health services (e.g. sexual health services).
3. A standalone Children and Young People's Service.

2.7 The re-tendering of the Children and Young People's Drug and Alcohol Treatment service in Cambridgeshire will provide the opportunity for transformational change that will more effectively address the emerging needs found in the recent Drugs and Alcohol Joint Strategic Needs Assessment and National Drugs Strategy. This includes the changing demographic of service users who have different needs, vulnerabilities and complexities. The aim is to secure evidence based services which have the following deliverables.

- An integrated specialist drug and alcohol young people's treatment system across Cambridgeshire.
- Services that reflect the specific needs of people and families that use them.
- Increased alignment and integration with related services to ensure that multiple vulnerabilities, complex needs and risky behaviours are addressed holistically and in a child centred way (including mental health, sexual health, domestic abuse, child sexual exploitation)
- A service reflecting the intrinsic differences, and transitional requirements, between adults and children and between children of different ages
- A service rooted in a strengths approach, delivering interventions focused on substance misuse itself and also developing confidence and enhancing personal resilience.
- Targeted interventions to young people at risk of developing problems with substances (alongside specialist services)
- Early intervention and harm reduction interventions.

- 2.8 The funding allocated to the Cambridgeshire tender totals £410,267 (£315,267 CASUS & £95,000 YOS) per annum. The contract proposed will start on April 1st 2019 and will be for 3 years with the option of extending it for one or two years, which will align it with the Peterborough contract.
- 2.9 On the 1st May, 2017 the new Cambridgeshire and Peterborough Public Health Joint Commissioning Unit (JCU) was created, establishing a new joint structure across the two local authorities. The new Public Health JCU structure provides an opportunity to develop wider collaborative strategic and commissioning initiatives at the same time as creating efficiencies.
- 2.10 The tender will be undertaken by the Public Health JCU and overseen by organisational governance structures, which includes the Cambridgeshire and Peterborough Joint Commissioning Board, an officer board with relevant expertise, which covers commissioning by the People & Communities Directorate and Public Health Directorate. The Joint Commissioning Board meets on 9th May, and will be asked to endorse and recommend the approach identified in the paper to the Health Committee. Verbal feedback will be provided at the Health Committee meeting. Delegated authority to award the contract will be sought through a further paper to Health Committee at the appropriate time.

3.0 ALIGNMENT WITH CORPORATE PRIORITIES

3.1 Developing the local economy for the benefit of all

The report above sets out the implications for this priority in paragraph 2.6

3.2 Helping people live healthy and independent lives

The report sets out the implications for this priority in paragraphs 2.1, 2.2, 2.3, 2.4, 2.5

3.3 Supporting and protecting vulnerable people

The report sets out the implications for this priority in paragraph 2.2

4.0 SIGNIFICANT IMPLICATIONS

4.1 Resource Implications

The report above sets out details of significant implications in **2.6, 2.9**

4.2 Procurement/Contractual/Council Contract Procedure Rules Implications

- 2.11** The report above sets out details of significant implications in **1.5, 2.9, and**
The Cambridgeshire and Peterborough Joint Commissioning Board has been asked to approve the proposal.

4.3 Statutory, Legal and Risk Implications

The report above sets out details of significant implications in **1.3, 1.5**

4.4 Equality and Diversity Implications

The report above sets out details of significant implications in **2.2 and 2.8**

4.5 Engagement and Communications Implications

The following bullet points set out details of other significant implications identified by officers:

- An integral element of the procurement process will be the consultation with stakeholders, service users and the public. The information secured from these processes will influence the service specification and ongoing development of the services.

4.6 Public Health Implications

The report above sets out details of significant implications in **2.1, 2.2, 2.3, 2.4, 2.5, and 2.6**

The following bullet points set out details of other significant implications identified by officers:

- Failure to provide effective young people's drug and alcohol treatment services will increase the risk of significant poor health and social outcomes for those affected.
- Patterns of alcohol and drug use have changed in recent years and different types of interventions and integrated models are required if treatment and management of all associated needs are to be effective.

Implications	Officer Clearance
Have the resource implications been cleared by Finance?	Yes Name of Financial Officer: Clare Andrews
Have the procurement/contractual/ Council Contract Procedure Rules implications been cleared by the LGSS Head of Procurement?	Yes Name of Officer: Paul White

Has the impact on statutory, legal and risk implications been cleared by LGSS Law?	Yes Name of Legal Officer: Karim Allis
Have the equality and diversity implications been cleared by your Service Contact?	Yes Name of Officer: Liz Robin
Have any engagement and communication implications been cleared by Communications?	Yes Name of Officer: Matthew Hall
Have any localism and Local Member involvement issues been cleared by your Service Contact?	Yes Name of Officer: Liz Robin
Have any Public Health implications been cleared by Public Health	Yes Name of Officer: Liz Robin

Source Documents	Location
<i>Cambridgeshire Drugs and Alcohol Joint Strategic Needs Assessment</i>	http://www.cambridgeshireinsight.org.uk/jsna
<i>National Drugs Strategy 2017, Home Office</i>	https://www.gov.uk/government/publications/drug-strategy-2017
<i>Public Health England: Guidance Alcohol and drug prevention, treatment and recovery: why invest? 2018</i>	https://www.gov.uk/government/publications/alcohol-and-drug-prevention-treatment-and-recovery-why-invest/alcohol-and-drug-prevention-treatment-and-recovery-why-invest