

**CAMBRIDGESHIRE ADULT DRUG AND ALCOHOL TREATMENT SERVICES  
PROCUREMENT**

*To:* **Health Committee**

*Meeting Date:* **September 7<sup>th</sup> 2017**

*From:* **Director of Public Health**

*Electoral division(s):* **All**

*Forward Plan ref:* **n/a** *Key decision:* **No**

*Purpose:* **To describe the rationale and benefits of procuring a new  
Cambridgeshire Adult Drug and Alcohol Treatment  
Services 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 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.**

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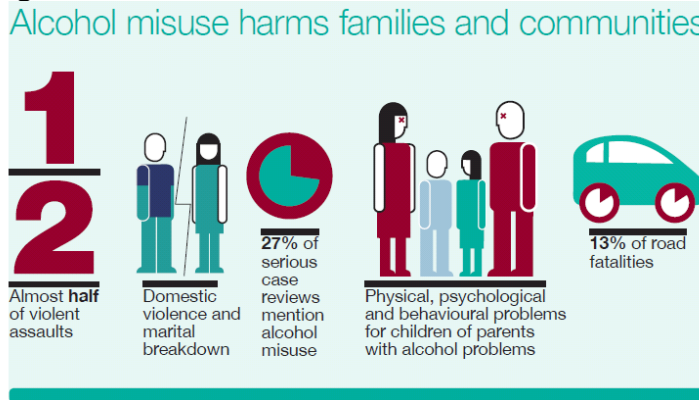
## **1. BACKGROUND**

- 1.1 Adult Drug and Alcohol specialist treatment provision across Cambridgeshire falls under two separate contracts provided by the same organisation, namely South Staffordshire and Shropshire Healthcare NHS Foundation Trust (SSSFT). Although there are two separate contracts, the two services have operationally become increasingly integrated, driven in part by the need to realise savings due to a reduction in the Public Health grant. Locally the services are referred to as 'Inclusion'.
- 1.2 The contracts were let at different times due to historical funding arrangements that reflect the transfer of commissioning responsibilities from the NHS to Local Authorities. 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..."
- 1.3 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.
- 1.3 Both contracts will shortly expire, the Drug Treatment Contract commenced on 1<sup>st</sup> April 2012 and the Alcohol Treatment Contract on 1<sup>st</sup> April 2014. They have both now been aligned in terms of end dates and are due to terminate on the 30<sup>th</sup> September 2018. It is proposed to formally commence the procurement in September 2017 after securing support from the Health Committee, which has responsibility for the Council's public health services and policies. Contract award is planned for June 2018 with a contract start date of the 1<sup>st</sup> October 2018.

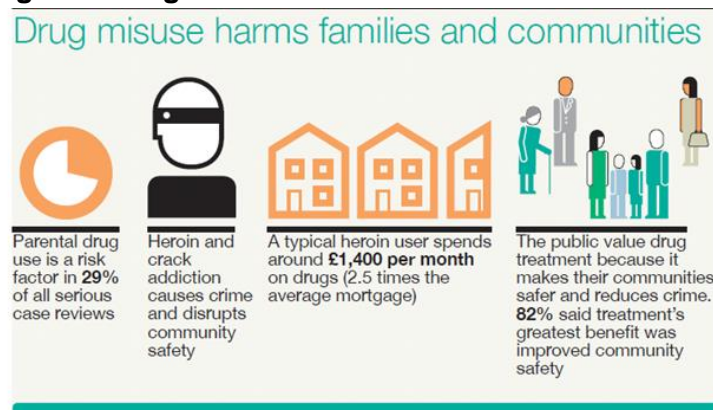
## **2. MAIN ISSUES**

- 2.1 There are far ranging effects upon the physical and mental health of those who misuse drugs and alcohol, which impact upon their families and communities and across wider aspects of their lives that are captured in Figures 1 and 2.

**Figure 1: Alcohol harms for families and communities**



**Figure 2 Drug misuse harms for families and communities**

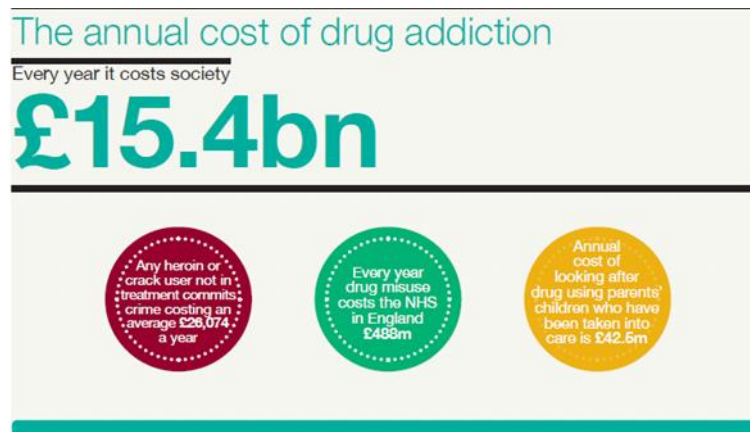


- 2.2 In addition there are socio-economic costs to society and services, which includes health services, social care, the criminal justice system, employers and housing services. The harms of drug and alcohol misuse have been modelled to show the costs of treating and addressing them. (Figures 3 and 4)

**Figure 3: Annual cost of alcohol to society**



**Figure 4: Annual cost of drug addiction to society**



- 2.3 There is considerable evidence that investment in effective drug and alcohol treatment services can bring a range of benefits.

**Figure 5: Investing in alcohol interventions**



**Figure 6: Investing in drug treatment services**



- 2.4 Only the Cambridgeshire Adult Drug and Alcohol specialist treatment contracts are in scope for this procurement. This includes Tier 4 in-patient and residential services. The Peterborough treatment contracts were let last year with its new integrated treatment service commencing on the 1<sup>st</sup> April 2016 and are not in scope for the tender.

Although the treatment contracts across both Peterborough and Cambridgeshire are not currently coterminous, it is envisaged that going forward break clauses in the new contract will be aligned with Peterborough's contract to provide future options for integration across both geographical areas.

The Children and Young People's Service, CASUS provided by Cambridgeshire and Peterborough Foundation Trust is also not in scope for the tender. This reflects in part that the contract end date does not align with those of the adult services, but also the need to look at transformational service models that would enable increased integration with other young people's services. For example, there is evidence that the integration of young people's services for drugs and alcohol with sexual health services improves outcomes. This requires further exploration with a range of services, which will be undertaken prior to re-commissioning the Service.

- 2.5 The re-tendering of the Adult Drug and Alcohol treatment system in Cambridgeshire will provide the opportunity for transformational change that will more effectively address the emerging needs found in the recent Cambridgeshire Drugs and Alcohol Joint Strategic Needs Assessment and National Drugs Strategy. This includes the changing demographic of service users who have different needs, recovery, and the particular requirements of vulnerable groups. The aim is to secure evidence based, better value services which have the following deliverables:

- An integrated specialist drug and alcohol treatment system across Cambridgeshire.
- Increased alignment and integration with related services to ensure that the complex needs (most notably poor mental and physical health, homelessness, unemployment) of service users are effectively addressed with treatment and recovery outcomes achieved.
- Robust recovery focused treatment approaches.
- A long-term condition treatment model, which decreases demand for acute treatment services and ensures that needs are appropriately addressed.
- Early intervention and harm reduction interventions.

- 2.6 Currently the adult drug and alcohol specialist treatment system spend in Cambridgeshire totals £5.3 million. Ongoing savings are required from the Public Health Grant, which potentially will affect the contract value. These will be identified in the business planning processes currently being undertaken.

- 2.7 On the 1<sup>st</sup> 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.

The tender will be undertaken by the Public Health JCU and overseen by organisational governance structures, which include the Cambridgeshire and Peterborough

Commissioning Board. The Commissioning Board has approved the tender being taken forward and recommends that the Health Committee endorses the approach identified in this paper.

### **3. 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 paragraphs 2.2 and 2.3

#### **3.2 Helping people live healthy and independent lives**

The report sets out the implications for this priority in paragraphs 2.1 and 2.3.

#### **3.3 Supporting and protecting vulnerable people**

The report sets out the implications for this priority in paragraph 2.1.

### **4. SIGNIFICANT IMPLICATIONS**

#### **4.1 Resource Implications**

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

#### **4.2 Procurement/Contractual/Council Contract Procedure Rules Implications**

The report above sets out details of significant implications in **1.3, 2.4, 2.5 and 2.7**

The proposal to undertake the procurement has been approved by the Cambridgeshire and Peterborough Joint Commissioning Board. It has not been reviewed by the Commercial Board

#### **4.3 Statutory, Legal and Risk Implications**

The report above sets out details of significant implications in **1.2**

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

- Failure to provide effective drug and alcohol treatment services will result in 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 services are required if treatment and management of all associated needs are to be effective.

#### **4.4 Equality and Diversity Implications**

The report above sets out details of significant implications in **2.4 and 2.5**

#### 4.5 Engagement and Communications Implications

The report above sets out details of significant implications in **2.4 and 2.5**

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 Localism and Local Member Involvement

There are no significant implications within this category.

#### 4.7 Public Health Implications

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

Implications	Officer Clearance
<b>Have the resource implications been cleared by Finance?</b>	Yes 16 Aug 2017 Name of Financial Officer: Clare Andrews
<b>Have the procurement/contractual/ Council Contract Procedure Rules implications been cleared by the LGSS Head of Procurement?</b>	Yes 22 <sup>nd</sup> Aug 2017 Name of Officer: Paul White
<b>Has the impact on statutory, legal and risk implications been cleared by LGSS Law?</b>	Yes 17 Aug 2017 Name of Legal Officer: Fiona McMillan
<b>Have the equality and diversity implications been cleared by your Service Contact?</b>	Yes 18/ Aug 2017 Name of Officer: Liz Robin
<b>Have any engagement and communication implications been cleared by Communications?</b>	Yes Name of Officer: Joanne Dickson
<b>Have any localism and Local Member involvement issues been cleared by your Service Contact?</b>	Yes 18 Aug 2017 Name of Officer: Liz Robin

<b>Have any Public Health implications been cleared by Public Health</b>	Yes 18 Aug 2017 Name of Officer: Liz Robin
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<b>Source Documents</b>	<b>Location</b>
<i>Cambridgeshire Drugs and Alcohol Joint Strategic Needs Assessment</i>	<a href="http://cambridgeshireinsight.org.uk/JSNA/Drugs-and-Alcohol-2015">http://cambridgeshireinsight.org.uk/JSNA/Drugs-and-Alcohol-2015</a>
<i>National Drugs Strategy 2017, Home Office</i>	<a href="https://www.gov.uk/government/publications/drug-strategy-2017">https://www.gov.uk/government/publications/drug-strategy-2017</a>