

Rough Sleeper Drug and Alcohol National Grant Funding

To: Adult and Health Committee

Meeting Date: 5 October 2023

From: Executive Director of Public Health, Jyoti Atri

Electoral division(s): All

Key decision: Yes

Forward Plan ref: 2023/082

Outcome: To provide Committee with information on the additional Rough Sleeper Drug and Alcohol Treatment Grant and the impact on commissioned services

Recommendation: Adults and Health Committee are being asked to agree:

- a) The proposal for investing the additional grant funding into continuation of services to support rough sleepers/homeless or at risk of homelessness.
- b) The commissioning of the current provider of the Drug and Alcohol Services, Change Grow Live (CGL) to provide the rough sleeper treatment provision of the service for an additional year (2024/25).
- c) Approve a contract variation for the estimated value of £499,190 for the current CGL integrated treatment contract (subject to confirmation of the final value of the Rough Sleeper Drug and Alcohol Grant).

Officer contact:
Name: Val Thomas
Post: Deputy Director of Public Health
Email: val.thomas@cambridgeshire.gov.uk
Tel: 07884 183373

1. Background

- 1.1 Drug and alcohol prevention and treatment services are included in the local authority Public Health Grant. The services are not specifically mandated, but 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..."
- 1.2 The National Drugs Strategy from "Harm to Hope;" published in December 2021 has resulted in additional short-term funding targeted at increasing and improving the capacity and quality of treatment services to reduce harm and improve recovery rates.
- 1.3 The Department for Levelling Up, Housing and Communities (DLUHC) and the Office for Health Improvement and Disparities (OHID) in the Department of Health and Social Care (DHSC) are working together to deliver a DLUHC-funded rough sleeping drug and alcohol treatment grant (RSDATG).
- 1.4 This S31 grant funding is targeted at local authorities identified by DLUHC and OHID as having the highest numbers of people placed into emergency accommodation during the Covid 19 pandemic and/or sleeping rough and/or at risk of sleeping rough and will contribute to the government's ambition to end rough sleeping by the end of this Parliament. Cambridge City was identified as one of 43 priority areas under phase one of the scheme and Cambridgeshire County Council was awarded funding in 2021 under the terms of this grant as the council holds responsibility for commissioning drug and alcohol treatment services. Homelessness is associated with poorer drug and alcohol treatment and overall health outcomes.
- 1.5 The current RSDATG funding has been allocated to the following:
 - a) to ensure that the engagement with drug and alcohol treatment services of people in emergency accommodation is maintained as they move into longer term accommodation (continuity of care).
 - b) to ensure that people rough sleeping, homeless and at risk of homeless can access drug and alcohol services and engage those in treatment who have not yet done so (engagement and access).
 - c) to build resilience and capacity in local drug and alcohol treatment systems to continue to meet the needs of this population in future years (resilient and sustainable models of care).
- 1.6 To meet these objectives the RSDATG has funded a specialist team in Cambridge City for people 'sleeping rough' or 'at risk of sleeping rough' to access and engage with drug and alcohol treatment and move towards longer-term accommodation. This specialist provision is a part of the commissioned countywide drug and alcohol treatment service provided by Change Grow Live (CGL).
- 1.7 The dedicated team consists of front-line outreach workers, a dedicated prescribing doctor, nurse, psychologists, and peer support coordination to engage and support rough sleepers with substance related issues into treatment and longer-term accommodation. The team is referred to as the 'HEaRT' team and works closely with local homeless related services including the Cambridge Access Surgery (dedicated GP surgery).

- 1.8 The grant funding was originally released for a 2-year period for operational use in 21/22 and 22/23. The national team then announced an extension until March 2024 (approval by Adults and Health Committee (14 July 2022)). A further 12-month extension has now been confirmed which ensures funding for the dedicated service is secured until 31 March 2025. This brings the RSDATG in line with other short term drug strategy related grant funding which are all due to end on 31 March 2025.
- 1.9 The table below shows the indicative RSDATG funding expected for 24/25. There are comprehensive national financial and performance monitoring linked to the S31 grant funding.

RSDATG	2024/25
Cambridgeshire (Cambridge City)	£514,561k (Indicative RSDATG figure subject to confirmation) Up to £499,190k to fund the treatment provision (CGL) and £15,371 commissioning and data support from Cambridge City Council.

2. Main Issues

- 2.1 The current Cambridgeshire Adult Integrated Drug and Alcohol Treatment contract is with Change Grow Live (CGL), a large third sector organisation who are one of the market leaders in this sector. It commenced on the 1st of October 2018 and ends 31 March 2026.
- 2.2 The CGL Adult Drug and Alcohol Treatment Service provides all elements of substance misuse treatment including early intervention advice and support, pharmacological treatment, harm reduction services, pharmacy delivered services (including needle and syringe programmes), psychosocial support, recovery support, community/inpatient detox, and residential rehabilitation.
- 2.3 The CGL countywide service is performing well compared to national average indicators and has demonstrated strong resilience over the covid pandemic. The service has grown considerably over the term of the contract expanding to meet local and national ambitions. The local work delivered under this grant has received positive interest from the national grants team both for the clinical work under the dedicated prescriber and for the psychology element of the provision which is focused on a trauma informed system approach to improving care for patients. An independent review has been commissioned to identify impact and outcomes to help inform future commissioning decisions.
- 2.4 The value of the original CGL contract for the initial 5.5-year term was £26.8 million. A number of contract variations have been made to this contract since its inception in October 2018 due to the receipt of additional national short term grant funding associated with the new National Drug Strategy which requires the delivery of national ambitions at a local level. The contract variations to date total £5.7 million and include a contract extension of an additional 2 years on the original term (approved by committee 5th October 2022) to deliver on the terms of the grant funding. If CGL is directly awarded the RSDATG for an additional year, then the contract value over the 7.5-year contract term will total £42.5 million.
- 2.5 The RSDATG funding available to CCC for 24/25 will be used to procure additional services

from CGL under the contract (contract variation) for the following reasons.

- The grant funded work has been collaboratively developed with CGL (as per requirements of the funding)
- The RSDATG project needs to continue to be delivered locally under the terms of the grant and any new procurement exercise would result in disruption and delay and a real risk to breaching the conditions of the S31 grant agreement.
- The grant is short term and only extended for a 12-month period.
- CGL as a provider is responsive and flexible to continue to deliver on the rough sleeping grant and understands the short-term element of the funding stream. CGL are a good solid provider, performing well and willing to adopt new ways of working to benefit patients and the wider system.

2.6 It is proposed that the RSDATG funding for 24/25 (£499,190.00) is directly awarded to Cambridgeshire Change Grow Live (CGL) to continue to deliver this dedicated rough sleeper support element of the service and ensure continuity of care for service users.

2.7 Advice received from Pathfinder Ltd (Stephen Randall) is that the Cambridgeshire CGL contract can be varied using Regulation 72 (1)(e) of the Public Contract Regulations (2015) which allows for contract modifications where the modifications, irrespective of their value, are not substantial within the meaning of paragraph (8).

3. Alignment with ambitions

3.1 Net zero carbon emissions for Cambridgeshire by 2045, and our communities and natural environment are supported to adapt and thrive as the climate changes.

There are no significant implications for this ambition.

3.2 Travel across the county is safer and more environmentally sustainable.

There are no significant implications for this ambition.

3.3 Health inequalities are reduced.

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

- Reducing homelessness will contribute to a reduction in health inequalities and improvements in a wide range of health outcomes.
- Increases access to longer term accommodation to meet individual needs (supported in required)
- Contributes to a reduction in early mortality.
- Addresses co-occurring mental ill health, substance misuse needs, physical health needs, and trauma.
- Increases access to harm reduction advice and interventions to prevent illness/harm e.g., screening, vaccinations, needle, and syringe provision.

3.4 People enjoy healthy, safe, and independent lives through timely support that is most suited to their needs.

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

- Promotes long term recovery.
- Supports trauma informed care.
- Increases support to access and maintain accommodation.
- Increases access to primary care.
- Provides a personalised care approach.

3.5 Helping people out of poverty and income inequality.

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

- Promotes long term recovery.
- Addresses housing needs, benefit needs, addressing debts.
- Provides access to personalised budgets to support recovery.

3.6 Places and communities prosper because they have a resilient and inclusive economy, access to good quality public services and social justice is prioritised.

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

- Reduces rough sleeping and any associated anti-social behaviour in communities.
- People receive help and support to access health and social care services.

3.7 Children and young people have opportunities to thrive.

- Substance using parents' engagement in treatment provision is a protective factor for children impacted by parental substance use and improves overall life chances.

4. Significant Implications

4.1 Resource Implications

The report above sets out details of significant implications in 1.9.

4.2 Procurement/Contractual/Council Contract Procedure Rules Implications

The report above sets out details of significant implications 2.7.

4.3 Statutory, Legal and Risk Implications

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

- Any implications for procurement/contractual/Council contract procedure rules arising from this additional grant funding will be agreed with the appropriate officers from these Departments and where necessary presented to the Adult and Health Committee before proceeding.

4.4 Equality and Diversity Implications

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

- The grant investment addresses the inequalities that this cohort experience by improving access to services.

4.5 Engagement and Communications Implications

The following bullet point sets out details of significant implications identified by officers:

- Any equality and diversity implications arising from these service developments will be identified and addressed before any additional service expansion.

4.6 Localism and Local Member Involvement

The following bullet point sets out details of significant implications identified by officers:

- We will work with local members to ensure they are fully aware of service developments to inform their work with individuals and communities.

4.7 Public Health Implications

The report above sets out details of significant implications in 1.4.

4.8 Climate Change and Environment Implications on Priority Areas

4.8.1 Implication 1: Energy efficient, low carbon buildings.

Status: Neutral

Explanation: Not influenced by the Service

4.8.2 Implication 2: Low carbon transport.

Status: Neutral

Explanation: Not influenced by the Service

4.8.3 Implication 3: Green spaces, peatland, afforestation, habitats, and land management.

Status neutral

Explanation: Not influenced by the Service

4.8.4 Implication 4: Waste Management and Tackling Plastic Pollution.

Status: Neutral

Explanation: Not influenced by the Service

4.8.5 Implication 5: Water use, availability, and management:

Status: Neutral

Explanation: Not influenced by the Service

4.8.6 Implication 6: Air Pollution.

Status: Neutral

Explanation: Not influenced by the Service

4.8.7 Implication 7: Resilience of our services and infrastructure and supporting vulnerable people to cope with climate change.

Status: Positive

Explanation: this funding supports those rough sleepers/risk of homelessness who misuse drugs/alcohol to engage in treatment with aim to be accommodated reducing the risks of exposure to extreme temperatures.

Have the resource implications been cleared by Finance? Yes

Name of Financial Officer: Justine Hartley 31/8/23

Have the procurement/contractual/ Council Contract Procedure Rules implications been cleared by the Head of Procurement and Commercial? Yes

Name of Officer: Claire Ellis 30/8/23

Has the impact on statutory, legal and risk implications been cleared by the Council's Monitoring Officer or Pathfinder Legal? Yes

Name of Officer: Stephen Randall

Have the equality and diversity implications been cleared by your EqIA Super User?

Yes

Name of Officer: Jyoti Atri 21/9/23

Have any engagement and communication implications been cleared by Communications?

Yes

Name of Officer: Simon Cobby 31/8/23

Have any localism and Local Member involvement issues been cleared by your Service Contact? Yes

Name of Officer: Jyoti Atri 21/9/23

Have any Public Health implications been cleared by Public Health?

Yes

Name of Officer: Jyoti Atri 24/8/23

If a Key decision, have any Climate Change and Environment implications been cleared by the Climate Change Officer?

Yes

Name of Officer: Emily Bolton 1/9/23

5. Source documents guidance

<https://www.gov.uk/government/publications/from-harm-to-hope-a-10-year-drugs-plan-to-cut-crime-and-save-lives/from-harm-to-hope-a-10-year-drugs-plan-to-cut-crime-and-save-lives#chapter-1--overview-and-approach>

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1102408/20220903_Ending_rough_sleeping_for_good.pdf