

MINUTES OF MEETING Cabinet Member Signing HELD ON Thursday, 21st March, 2024, 11.00am - 11.35am

PRESENT:Councillor Lucia das Neves

ALSO ATTENDING: Sarah Hart online, Ayshe Simsek

9. FILMING AT MEETINGS

The Chair referred to the filming at meetings notice and attendees noted this information.

10. APOLOGIES FOR ABSENCE

There were no apologies for absence.

11. DECLARATIONS OF INTEREST

There were no declarations of interest put forward.

12. DEPUTATIONS / PETITIONS / QUESTIONS

There were no deputations, petitions or questions put forward.

13. REQUEST FOR APPROVAL OF ACCEPTANCE OF THE GRANT AWARD TO HARINGEY COUNCIL FROM THE DEPARTMENT OF HEALTH AND SOCIAL CARE FOR ROUGH SLEEPING DRUG AND ALCOHOL TREATMENT

The Cabinet Member for Health, Social Care and Wellbeing considered the report, which sought approval to accept the Rough Sleeper Drug and Alcohol Grant 2024/2025.

The Cabinet Member was asked to note the following:

- This was the third year of receiving this grant funding and the Council were pleased to continue receiving this grant, providing sustainability for work with the homeless community and supporting them with drug and alcohol treatment.
- This was a good participatory team which was a place based working closely with homeless people.
- The grant application would be used to commission the drug and alcohol rough sleeping team that was made up of multi skilled workers from organisations such as BUBIC and included: a senior practitioner, psychology nurse,

prescribing nurse, alcohol worker, Eastern European worker and alcohol complex worker.

- There had been 259 referrals and 222 accepted for treatment. There were around 26 sources of referrals and these were mainly from peer agencies referring clients to this service. It was noted that 146 of the 222 referrals had entered a structured treatment programme and this had increased in quarter three of reporting to 74% of referrals.
- There were no key performance indicators to following terms of grant funding and this allowed the Council to set their own objectives, which were engagement and harm reduction.
- With regards to the housing status at referral, 56 % were officially sleeping rough at referral and the rest were at risk of homelessness.
- Noted that there were 25 out of 125 exits from the service connected with successful completion of the treatment. There were 3 deaths, 68 unplanned exits, 18 moved out of the area and 11 transferred into custody.
- The borough were one out of seven boroughs to be part of the national evaluation programme and reflected the confidence in the provision of the service.

In response to questions from the Cabinet Member, the following information was noted:

- It was known that 70% of rough sleepers had a substance misuse issue and the increase in referrals to the service reflected the Council were engaging better with rough sleepers. However, the rough sleeping team would likely contend that there was an increase in rough sleeping in the borough as well. The aim was to increase referrals and support more people.
- On exiting the provision, rough sleepers were predominantly offered alcohol harm reduction support. Through, having created a support relationship, the support officer was able to talk through the impact and provide support on improving wellbeing. Those exiting that a drug misuse issues were prescribed medication to support withdrawal. They were offered d access to GP and supported to apply for stable housing.
- 25 clients had completed treatment for drug and alcohol misuse.
- Accommodation support to help with abstinence was important and this was the biggest barrier for continued abstinence. There were good working relationships developed with health providers providing rehab and detox treatment.
- The provision had a strong safeguarding component and there was strong awareness of the risks and actions to reduce deaths in rough sleepers.

- Agreed that there be a wider update to all councillors on the work of BUBIC and HAGA as there were councillors that were concerned about people in their communities that were rough sleepers and it would be important to socialise the work of this provision and provide information about access to it.
- The continued funding provision would provide security for maintaining the employment of the team members who were experienced and also indicated likely further funding, providing sustainability of the team. A four year strategy for this provision would be developed and include trainee posts and participation of BUBIC in service development.
- The issues of meeting and locally interacting with rough sleepers was discussed and noted that there was a community development solution being worked to with effective engagement with the health trust and other agencies to prescribe medication as soon as the need is identified.

RESOLVED

To approve the receipt of Department of Health and Social Care Rough Sleeping Drug and Alcohol Treatment grant of £702,145, for the year 2024/25 as permitted under Contract Standing Orders 16.02 and 17.1.

14. AWARD OF CONTRACT TO PROVIDE - COMMUNITY SEXUAL HEALTH SERVICES - OUTREACH AND HEALTH PROMOTION

The Cabinet Member for Social Care, Health and Wellbeing considered the report, which detailed the outcome of an open tender process and sought approval to award the Public Health Contract for Community Sexual Health Services – Outreach and Health Promotion in accordance with Contract Standing Orders (CSO) 9.07.1 (a) and 16.02.

The current contract expired on 31st March 2024 and a procurement process had been undertaken to ensure that a new contract was in place to meet the Council's requirements.

The Cabinet Member was advised that this was a community outreach service and place based offer. The provision was based in community centred facing services and aimed to provide a broad range of services through an outreach, sexual health promotion/signposting and dedicated support for those most impacted by sexual ill health and HIV.

The contract promoted testing in communities and responded to the needs of the diverse communities in the borough, tackling the cultural barriers and working in a culturally sensitive way. The successful bidder outlined in Appendix B had been effective in their step change from providing advice to the provision of testing, and

were known for their positive work in particular communities, further demonstrating that they could work in a multi-cultural community.

Further to considering exempt information,

RESOLVED

1. That in accordance with Contract Standing Order (CSO) 16.02 and 9.07.1 (a), to agree to award, a contract for the Provision of a Community Sexual Health Service focusing on outreach and health promotion to the successful bidder identified in Appendix 1 – Part B of this report.
2. To agree that the proposed contract shall run for a period of three (3) years commencing 1st April 2024 to 31st March 2027 at an annual cost of £233,000 (totalling £699,000 over 3 years), with an option to extend for a period or periods of up to two (2) years. For the avoidance of doubt the maximum contract length would be five (5) years, if extended. The aggregated total cost of the contract including the proposed extension period will be £1,165,000.

15. EXCLUSION OF THE PRESS AND PUBLIC

RESOLVED

To exclude the press and public be from the meeting as it contains exempt information as defined in Section 100a of the Local Government Act 1972 (as amended by Section 12A of the Local Government Act 1985); para 3, namely information relating to the financial or business affairs of any particular person (including the authority holding that information).

16. EXEMPT - AWARD OF CONTRACT TO PROVIDE - COMMUNITY SEXUAL HEALTH SERVICES - OUTREACH AND HEALTH PROMOTION

Exempt information was considered.

CHAIR:

Signed by Chair

Date