

**Report for:** Cabinet Member Signing – 18 March 2022

**Title:** Approval of acceptance of Grant Funding for 2022/23 for the Supplemental Funding for Substance Misuse Treatment and Recovery.

**Report authorised by:** Will Maimaris, Director of Public Health

**Lead Officer:** Sarah Hart, Public Health Senior Commissioner, Substance Misuse, Sexual Health, Health improvement, 020 8489 1480, [sarah.hart@haringey.gov.uk](mailto:sarah.hart@haringey.gov.uk)

**Ward(s) affected:** All

**Report for Key/  
Non-Key Decision:** Key Decision

## 1. Describe the issue under consideration

- 1.1. The Council has been given early warning of an indicative grant from the Office of Health Improvement and Disparities (OHID). The grant is to support improvements in the quality and capacity of substance misuse treatment and recovery for Haringey residents. The Cabinet Member for Health, Social Care and Wellbeing is asked for rapid approval to accept this grant, thus allowing existing contracts to be extended and planning to commence.

## 2. Cabinet Member Introduction

N/A

## 3. Recommendations

The Cabinet Member for Health, Social Care and Well-Being is asked:

- 3.1. In accordance with Contract Standing Orders (CSO) 16.02 and 17.1, to approve the receipt of the OHID grant to supplement funding for substance misuse treatment and recovery for the year 2022/23.
- 3.2. The Grant is expected to be in the region of £850,000 for 2022/23.

## 4. Reasons for decision

- 4.1. Reducing the impact of drugs and alcohol misuse on adults, families and the community is a cross cutting Council priority. The Council therefore welcomes a significant uplift in funding over the next three years. We have received very late notification of the funding for the financial year 2022/23, which is still only indicative. However, some of this grant is already committed to contracts due to

finish in March 2022. We wish to accept the indicative budget for 2022/23 to be able to extend our current contracts and to start planning. The plan is then to return to Cabinet to accept the confirmed budgets for subsequent years with a comprehensive plan for spend.

## **5. Alternative options considered**

- 5.1. The Cabinet Member could refuse to receive the grant. However, as there is a clear need for this work and strong support to continue to tackle the impact of substance misuse on the community, this option has not been considered.

## **6. Background information**

- 6.1. In 2019 Haringey Council concerned about the impact of drug use on the community held a Chief Executives 'Haringey Stat' on Drugs in Haringey. The event was attended by a large number of stakeholders from across the partnership.
- 6.2. The Independent Review on Drugs by Dame Carol Black was published in 2019. This would have been followed by a new drug strategy with funding from the next three-year Comprehensive Spending Review, however the Covid 19 pandemic delayed this. To fill this gap the government created in 2020/22 a Universal Grant. Haringey's allocation was £480,000. Through co- production and stakeholder engagement, the Public Health team rapidly commissioned services in line with the Universal Grant guidance. These services are monitored closely and progressing well. However, the contracts end in March 2022.
- 6.3. The Dame Carol Black Independent Review on Drugs , stated that as Government has disinvested in tackling drugs over the years, there has been a noticeable increase in drug supply and purity. This has fuelled drug related crime, particularly violent crime, and the use of vulnerable children in drug trafficking. It's also a factor that in 2018 we witnessed the highest recorded levels of drug related deaths. The disinvestment in drug treatment meant that long-term drug users were cycling in and out of our prisons, at great expense but very rarely achieving recovery or finding meaningful work. The review stated that the total cost to society of illegal drugs is around £20 billion per year, but only £600 million is spent on treatment and prevention. So, the amount of un-met need is growing, some treatment services are disappearing, and the treatment workforce is declining in number and quality.
- 6.4. In 2020, to start the work of addressing the Dame Carol Black review, Haringey received £480,000 Universal grant payable over 15 months from OHID. Haringey use this funding to provide additional drug treatment crime and harm reduction activity.
- 6.5. The Council was asked to complete an application for the grant. Completion of the application was led by the public health team in close consultation with community safety, co producers and providers. The guidance was very specific that the funding was only for adult drug treatment, with a strong focus on outreach, harm reduction, criminal justice, new forms of treatment and recovery.

6.6. The grant had challenges in terms of a very fast turnaround. Plus, as stated in the Dame Carol Black Review, there was already a workforce deficit. However, Haringey made excellent progress, recognised in a visit from the Permanent Secretary of State and New Drugs Unit, to meet the new teams.

6.7. The table below gives a flavour of the activities and success of the Universal Grant to date.

Table 1 Universal projects and their successes.

Area of activity for the contract	Services	Achievements since July
Harm reduction	<b>Barnet Enfield and Haringey (BEH) Mental Health Trust</b> have employed a harm reduction lead.	<ul style="list-style-type: none"> <li>• Covid vaccine information leaflet designed by service users</li> <li>• Review with service users of needle exchange pack.</li> <li>• Training of all hostel workers in preventing overdoses Naloxone pilot in 2 pharmacies</li> </ul>
Criminal reduction	<b>Humankind</b> – 5 new criminal justice workers, targeting males under 25 years old, women and prolific offenders, who keep revolving around systems. Offering case managers with a flexible way of working.	<ul style="list-style-type: none"> <li>• 5 graduates employed, inducted and training on the job as criminal justice workers. Pathways for young male offenders designed.</li> <li>• Increase in referrals from courts and prison.</li> </ul>
Outreach	<b>Bringing Unity Back into the Community</b> – peer led night outreach.	<ul style="list-style-type: none"> <li>• Night outreach begun.</li> <li>• Survey of this population group out at night to determine what night services they would like to support them to keep off the streets</li> </ul>

		<ul style="list-style-type: none"> <li>• Joint work in Turnpike Lane</li> <li>• Joint work in closing a crack house</li> </ul>
Peer support	<b>Inspirit</b> – creating a new workforce through offering residents who are ex substance misusers, who have been co-producing services or volunteering, a diploma in health and social care and substance misuse worker training.	<ul style="list-style-type: none"> <li>• 4 Haringey ex users taken onto a diploma, now reached stage of placements in services.</li> <li>• Pavilion recovery project, led by co producers begun.</li> </ul>
New treatment	<b>BEH Mental Health Trust</b> – brand new type of treatment that can be administered monthly	<ul style="list-style-type: none"> <li>• 12 people have commenced on Buvidal, 11 have been maintained on the medication.</li> </ul>

6.8. New funding - The Government responded to the Dame Carol Black Review in July 2021 and subsequently published the National Drug Strategy (Dec 2021). Now it has announced a supplemental Substance Misuse Treatment and Recovery Grant, which should be used by local authorities to address the aims of the treatment and recovery section of the drug strategy. On a national basis the additional funding should deliver:

- 54,500 new high-quality treatment places, including: 21,000 new places for opiate and crack users, bringing a total of 53% of opiate and crack users into treatment. A treatment place for every offender. 30,000 new treatment places for non-opiate users and alcohol users. 5,000 more young people in treatment. 24,000 more people in long-term recovery from substance dependence. 800 more medical, mental health and other professionals. And 950 additional drug and alcohol and criminal justice. Workers
- Sufficient commissioning and co-ordinator capacity in every local authority

6.9. This enhanced funding will enable Haringey to go above and beyond what the Universal projects have achieved. Our priority for 2022/23 is to ensure that the Universal providers and co producers continue the great work and build the evidence base for their services. Then we will complete a rapid needs

assessment and equality audit with partners to agree priority areas for 'year one' investment. Alongside this we will simultaneously create a three-year Treatment and Recovery Plan. Importantly the new funding goes beyond the Universal grant criteria, including services for young people, families and for alcohol misuse. As well as building the main workforce and reducing caseloads.

- 6.10. The Public Health team will return to Cabinet in December 2022, for agreement to accept the next two years of funding and a comprehensive plan of how the funding will be used to achieve the hard outcomes that are described in the new drug strategy and Dame Carol Black's vision for drug treatment and recovery systems.

## **7. Contribution to strategic outcomes**

Priority 1: Best Start in Life  
Priority 2: Outstanding for All

## **8. Statutory Officers comments (Director of Finance (including procurement), Head of Legal and Governance, Equalities)**

### **8.1 Finance**

- 8.1.1 An indicative amount of £848,911 has been awarded to London Borough of Haringey for 2022-23, to support its drug strategy. It is intended that the funds will support the programme, and expenditure will not exceed the budgeted amount.

### **8.2. Procurement**

- 8.2.1. The receipt of the Grant funding is permitted under Contract Standing Orders 17.1.(approval for receipt of grant) and 16.02 which enables urgent decisions or decisions required in between Cabinet meetings to be made, in this case due to the timing of the notification of the grant allowance award.

- 8.2.2. The award will assist the public health team to underpin good work already underway in this area and will support the continuation of contracts set up to deliver the substance misuse strategy for treatment and recovery, as well as plan for future service developments

- 8.2.3. The public health team will monitor provision to ensure that the grant conditions are met, and outcomes delivered

### **8.3. Legal**

- 8.3.1 The Head of Legal and Governance (Monitoring Officer) has been consulted in the preparation of the report.

- 8.3.2 Pursuant to Contract Standing Order 16.02 and Contract Standing Order 17.1 the Cabinet Member having the relevant portfolio responsibilities has authority to approve receipt of the grant referred to in the recommendations.

8.3.3 The Head of Legal and Governance sees no legal reasons preventing the Cabinet Member for Health, Social Care & Wellbeing from approving the recommendations in the report.

#### 8.4. **Equality**

8.4.1. The Council has a public sector equality duty under the Equalities Act (2010) to have due regard to:

- Tackle discrimination and victimisation of persons that share the characteristics protected under S4 of the Act. These include the characteristics of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex (formerly gender) and sexual orientation;
- Advance equality of opportunity between people who share those protected characteristics and people who do not;
- Foster good relations between people who share those characteristics and people who do not.

8.4.2. This report relates to the receipt of a grant for residents with substance misuse issues. The service by its nature provides support to vulnerable people, including those with the protected characteristics.

8.4.3. Substance misuse is highly stigmatised and so it is to be expected that adults, young people, and parents with protective characteristics may face additional challenges in seeking help. This is explored within the needs assessments, equity audits and service design. Having people with lived experience co deliver services and monitor service will further expand equity. Data from these projects will include all protective characteristics.

8.4.4. The contract specifications clearly set out the supplier's responsibilities under equalities legislation, including a requirement to have in place up to date equalities policies and to ensure that the service is accessible to all sections of the community.

8.4.5. The contractor's compliance with equalities legislation will continue to be quality assured through regular contract monitoring and service review.

#### 9. **Use of Appendices**

9.2. None

#### 10. **Local Government (Access to Information) Act 1985**

10.2. Not Applicable