

Report for: Haringey Cabinet 15 November 2016

Item number: 14

Title: Contract extensions for children and young people and families substance misuse

Report authorised by : Jeanelle De Gruchy

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Ward(s) affected: All

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

1. Describe the issue under consideration

- 1.1. The report seeks agreement by Cabinet of the extension of the substance misuse service for children, young people and families substance misuse service. The contract was awarded by Cabinet for an initial period of three years, with an option to extend for a further 2 years, the current contract ends in March 2017.
- 1.2. The report recommends the award of contract extension for 2 years in accordance with Contract Standing Order (CSO 10.02.2).

2. Cabinet Member introduction

- 2.1 Early intervention approaches can and should play a central role in local approaches to tackling young people's substance misuse and reducing the risks of young people starting to use drugs and alcohol problematically. Problematic use means drug or alcohol use that has a negative impact on their health, wellbeing, relationships and education.
- 2.2 When the service was reviewed in 2013/14 young people clearly identified wanting a service that was separate from adults services, with its own name and which could be easily accessed. Young people were part of the evaluation of the tender process of which Insight Platform was the successful bidder. Cabinet awarded this contract for 3 years with an option to extend for a further 2 years. The specified outcomes have been met and the services remain busy and well used. I would therefore support the request to extend the contract for a further 2 years.

3. Recommendations

- 3.1. In accordance with CSO 10.02.2 to agree the extension of the following contract for 2 years.

Organisation	Service provided	Total value for life of the contract extensions
CDP Blenheim (Insight Platform)	Children's young people and families substance misuse service	£570,000 (start date 1 April 2017)

4. Reasons for decision

- 4.1. In 2014 a contract was awarded by Cabinet for a children's young people and families substance misuse service. The contract length was for 3 years with the option to extend for a further 2 years.
- 4.2. The service has recently been realigned with the Council's new children's services structure and is working in an integrated way with teams.
- 4.3. The service is meeting expected outcomes. To ensure continued service improvement over the next two years, the service will be monitored on a quarterly basis and the public health commissioner will continue to meet with children's service managers to ensure the service is working closely with the Council's children's services.

5. Alternative options considered

- 5.1. There is a competitive market for the provision of adult substance misuse services; however few provide stand alone children's services. When the service was tendered in 2013/14 there were 3 bidders. Instead of extending the contracts Haringey could have returned to the market by retendering, it took the decisions not to for the following reasons;
- Since the last procurement no new market opportunities in terms of technological changes or new providers, have arisen.
 - The current provider was the incumbent provider when the service was last tendered and continues to deliver well and to have an excellent relationship with children's services particularly schools.
 - When benchmarked against other councils this services perform well in terms of outcome and the length of time it takes to complete treatment.
 - There is no intention at this stage to radically re-specify the services.
 - Re tendering creates anxiety within staff and service users, the types of services delivered within this contract rely on a strong stable relationship between service users and their key worker.

6. Background information

6.1 Very few young people develop substance misuse dependency. Those who use drugs or alcohol problematically are likely to be vulnerable and experiencing a range of problems, of which substance misuse is one. Young people's needs differ from adults:

- The majority of young people accessing specialist drug and alcohol interventions have problems with alcohol (37%) and cannabis (53%), requiring psychosocial, harm reduction and family interventions, rather than treatment for addiction, which most adults but only a small minority of young people require.
- Most young people need to engage with specialist drug and alcohol interventions for a short period of time, before continuing with further support elsewhere, within an integrated young people's care plan.
- Most support plans for young people include help for parents and siblings.

6.2 Haringey commissions a specialist substance misuse service for young people because their needs differ from adults and require close working with children's services.

6.3 The Haringey service also helps families with different sorts of substance misuse related need:

- Families who do not have substance misuse problems themselves but need the skills to help their children.
- Parents in the drug and alcohol services who need parenting skills.
- Partners/parents of those who use drugs who are the main carer for children who want reassurance and support.
- Parents in children services who misuse substances who need an integrated substance misuse and parenting service.

6.4 In terms of capacity, the service is reaching its targets; in 2015/16:

- 332 young people had brief advice sessions
- 202 young people with a substance misuse problem were worked with of which 67% were referred from universal education and 3% alternative education and 11% children's services and 3% CAMHs
- 79% of young people left treatment in a planned way
- 80 family members were worked with
- 150 professionals were trained around substance misuse.

7. Contribution to strategic outcomes

7.1. The young people's service is a key element of Priority 1, helping young people to fulfil their potential.

8. Comments of the Chief Finance Officer and financial implications

- 8.1. This report details the proposal to extend the substance misuse contracts recommending extension for a further 2 years.

The total value of the contract over the final two years of this contract is £570,000 funding from the Public Health grant has been identified to commission these services withing the current MTFS.

9. Head of Procurement Comments

- 9.1. The Contractor has been providing a good service which has been regularly monitored by both service and its users. They have demonstrated service efficacy by meeting contract targets and reducing the level of substance misuse which compares favourably with national statistics and contributes to the Corporate Plan.
- 9.2. The recommendation for contract extensions will enable continuity of provision, provide additional efficiency savings and is line with the requirements of Contract Standing Order 10.02.2.
- 9.3. Service must, however, continue to ensure the contract is regularly monitored and key performance targets are met.

10. Comments of the Assistant Director of Corporate Governance and legal implications

- 10.1 The Assistant Director of Corporate Governance notes the contents of the report.
- 10.2 This is a key decision and the Service have confirmed this is on the Forward Plan.
- 10.3 The Assistant Director of Corporate Governance confirms there are no legal reasons preventing Cabinet from approving the recommendations in the report.

11. Equalities and Community Cohesion Comments

- 11.1. 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.

11.2. These contracts have been developed to address health inequalities as identified through the Joint Strategic Needs Assessment. A full Equality Impact Assessment was conducted as part of the tendering process. All providers collect data to monitor their fulfilment of equalities duties.

12. Use of Appendices

None

13. Local Government (Access to Information) Act 1985

N/A