**REPORT TO:** Health & Wellbeing Board

**DATE:** January 19<sup>th</sup> 2022

**REPORTING OFFICER:** Director of Public Health

**PORTFOLIO:** Health & Wellbeing

SUBJECT: The procurement of a new Integrated Specialist Adult

Community Substance Misuse Service for Halton

#### 1.0 PURPOSE OF THE REPORT

1.1 To inform the Board of the decision to award a contract to the provider who, through an open procurement exercise have been assessed as being the most economically advantageous and effective organisation to deliver an Integrated Specialist Adult Community Substance Misuse Service for Halton and to receive a brief update on performance to date.

#### 2.0 **RECOMMENDATION THAT THE BOARD:**

- Note the outcome of the formal open procurement exercise for the provision of an Integrated Specialist Adult Community Substance Misuse Service for Halton and the award of a contract to CGL.
- 2) Note the brief update on the current service performance.

#### 3.0 **SUPPORTING INFORMATION**

- 3.1 Halton Borough Council is responsible for commissioning services to support local people with substance (drugs and alcohol) misuse problems. The aim is to improve health and social care outcomes, reduce the harm from addiction to legal and illicit substances, promote recovery and reduce health inequalities for local people.
- 3.2 Supporting people living with addictions is a mandatory element of the Public Health Grant and as such, the provision of local services is a key local requirement. The Joint Strategic Needs Assessment (JSNA) and Health and Wellbeing Strategy identify the local problems caused by the use of substances, and reducing the harm caused by alcohol in particular remains a key local, regional and national priority.
- 3.3 The substance misuse service aims to bring together local partners to support Halton to meet the key objectives and priorities to educate and inform local people and to prevent and tackle substance misuse wherever it occurs. Whilst levels of risk are high locally, a lower proportion of Halton young people appear to be starting to take drugs than their peers regionally and nationally with levels of those drinking alcohol falling and broadly similar to regional levels. Slightly more adults in Halton say they drink alcohol than across Merseyside or England.
- 3.4 There is a significant relationship between drug related hospital admissions and deprivation. Certain vulnerable groups are also more likely to have problems with drug and alcohol misuse including military veterans, homeless people and offenders. Drug use is a significant issue amongst those who commit criminal offences. Hospital admissions for alcohol, both generally and for those under the age of 18, remain higher than the regional and local averages.

- 3.5 The Commissioners have sought the provision of a high quality service that is both effective in improving universal outcomes through the use of evidence based interventions delivered by skilled practitioners, and also safeguards local people at risk of harm.
- A procurement exercise was undertaken and completed in October 2021. Despite significant interest, only one application was received for consideration. The application was from the incumbent provider, **CGL** (**Change Grow**, **Live**). The application was assessed on the basis of both cost (30%) and quality (70%). The application from CGL exceeded the minimum standards expected and met all aspects of the proposed contract and specification.
- The expectation is that the service will combine a balance of advice/guidance and promotional/prevention activity as well as direct evidenced based interventions for those that require clinical support. Such an approach will enhance the availability of local services that are joined up, supportive and affordable to meet the identified needs of the population of the area they serve.
- 3.8 As well as providing an outstanding application, throughout the last 18 months CGL have proven themselves as a supportive and successful organisation in terms of helping some of our most vulnerable residents. The impact of the pandemic on service users, staff and partners has been immense, and our local teams have found new ways to continue to support some of our most vulnerable residents.
- 3.9 Despite the challenges faced from the pandemic, CGL has continued to perform highly across all domains. In particular, the service has continued to perform above both Public Health England and National averages. This is a testament to all of the teams engaged in supporting the substance misuse agenda and their commitment, focus and motivation despite the challenges faced over the last 18 months.
- 3.10 **New Treatment Journeys -** During Quarter 2, the team assessed 171 individuals for support. This was an increase from the previous three quarters (Q3, 150; Q4, 149. Q1 170). The primary substance of choice was alcohol, followed by alcohol and non-opiates combined.

| Substance of choice | Total Q2 | Total<br>Q1&Q2 |
|---------------------|----------|----------------|
| Alcohol             | 109      | 189            |
| Opiates             | 23       | 53             |
| Non-Opiates         | 28       | 55             |
| Alcohol/Non-Opiates | 11       | 46             |

3.11 The team are continuing to offer both face to face and telephone assessments, following feedback from staff and service users about the benefits of assessment via telephone. This included some individuals feeling more comfortable at home, being able to engage more within the assessment process.

Current Caseload (Q2 Jul – Sep 21)

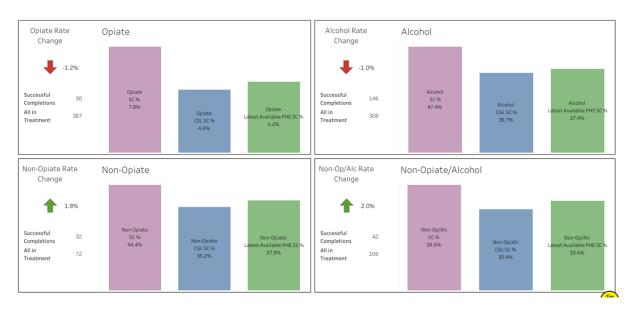
| Structured Treatment Numbers in Treatment - Primary Alcohol |       |
|---|-------|
| Structured Treatment Core (Specialist Service)              |       |
|   | Total |
| Structured Treatment Numbers in Treatment - Primary Drugs   |       |
| Structured Treatment Core (Specialist Service)              |       |
| Structured Treatment Shared Care                            |       |
| Opiates   |       |
| Alcohol/Non Opiates   |       |

| Total Q2 |
|----------|
| 233      |
| 233      |
| Total Q1 |
| 389      |
| 0        |
| 297      |
| 55       |
|          |

| Non Opiates | 37  |
|-------------|-----|
| Total       | 389 |

| Active in Recovery Support (post structured treatment) | Total Q1 |
|--|----------|
| Alcohol  | 47       |
| Drug   | 67       |
| Total  | 114      |

3.12 Completed Treatment Journeys - At the end of quarter 2, CGL Halton successful completion rate across all four cohort domains (Alcohol / Opiate / Non-Opiate / Non Opiate & Alcohol) remains above both CGL nation average and PHE average. This is a great achievement given the pandemic situation. All individuals successfully discharged from the service are provided with the opportunity to remain in our recovery support element of treatment, providing relapse prevention and ongoing support in continuing to build recovery capital to maintain positive changes made.



3.13 Opiate Caseload - As can be seen from the graph below, caseloads for opiate clients have increased since May 2019 from 255 - 309 in May 2021. The service saw the highest number on opiate caseload at 313 in November 2020, (an increase of 58 clients compared to 2019). This is consistent with increased attempts at rapid re-engagement for those who disengage, in addition to optimisation of opiate substitute prescribing, which has seen an improved engagement in services.



Tackling the impact of substance misuse on our communities remains a priority for Halton and the proposals put forward by CGL as part of their application mean they can build on the success of the past and continue to grow and develop local services to reduce local inequalities and improve the health and wellbeing of local people.

#### 4.0 POLICY IMPLICATIONS

4.1 The provision and performance of a substance misuse service is in line with the priorities set out in the local Health & Wellbeing Strategy and is a core condition of the Public Health grant.

### 5.0 FINANCIAL IMPLICATIONS

5.1 Financial provision for the Service is contained within the Public Health ring fenced grant. A contract will be awarded for **three (3) years** with **two one year optional extensions**. TUPE regulations will apply for affected staff, and measures will be put in place to review contract values on an annual basis in line with available resources.

### 6.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES

## 6.1 Children and Young People in Halton

The service contributes to the delivery of the objectives of the Halton Children's Plan.

#### 6.2 Employment, Learning and Skills in Halton

The service contributes to supporting local residents affected by substance misuse to regain control of their lives and access opportunities to improve their employment, learning and skills in a recovery focused environment.

## 6.3 A Healthy Halton

Specialist Community Substance Misuse Service are important in promoting the health and wellbeing of all service users and their families and reducing inequalities through targeted intervention for vulnerable and disadvantaged individuals. The service contributes to the delivery of the objectives of the Health and Wellbeing Board.

#### 6.4 A Safer Halton

The service contributes to a Safer Halton by supporting local people in reducing risk taking behaviour, such as alcohol, drugs, etc. Community services also play an important role in reducing crime and anti-social behaviour

3.14

# 6.5 **Halton's Urban Renewal** N/A.

# 7.0 EQUALITY AND DIVERSITY ISSUES

7.1 All contractors will be required to demonstrate that they embrace and comply with the Equality Act, and services will be monitored to ensure this is the case.

# 8.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972

| Document                          | Place of Inspection | Contact Officer |
|-----------------------------------|---------------------|-----------------|
| None under the meaning of the Act |                     |                 |