

CABINET

26 NOVEMBER 2013

GATEWAY 1 PROCUREMENT COMMENCEMENT: DRUG AND ALCOHOL SERVICES FOR PEOPLE UNDER THE AGE OF 18: COMMUNITY SUBSTANCE MISUSE SERVICES

Portfolio Holder: Councillor Mike O'Brien, Children's Services (Lead

Member)

Report from: Barbara Peacock, Director of Children and Adult

Services

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Lead

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Summary:

This report seeks permission to commence the procurement of Young People's Community Substance Misuse services in Medway. The current contract arrangements are due to end on 31 March 2014.

This report has been approved for submission to the Cabinet after review and discussion at the Children and Adults Directorate Management Team meeting on 29 October 2013 and Procurement Board on 13 November 2013. Children and Adults DMT has recommended that this project be approved as "Category B High Risk" at Procurement Gateway 1 by Cabinet.

1. BUDGET AND POLICY FRAMEWORK

1.1 Service Background Information

The National Drug Strategy 2010 states that the focus for all activity with young people with drug or alcohol issues should be preventing the escalation of use and harm, including stopping young people becoming adult addicts. Drug and alcohol interventions need to respond incrementally to the risks in terms of drug use, vulnerability and, particularly, age.

Young people and their needs differ from adults:

• The majority of young people accessing specialist drug and alcohol interventions have problems with alcohol (37%) and cannabis (53%). This requires psychosocial, harm reduction and family interventions. This contrasts with adults who are more likely to require treatment for addiction.

Most young people need to engage with specialist drug and alcohol interventions for a short period of time, often weeks, before continuing with further support elsewhere through an integrated young people's care plan. Those who use drugs or alcohol problematically are likely to be vulnerable and experiencing a range of problems, of which substance misuse is one.

This means that the commissioning and delivery of specialist drug and alcohol interventions for young people should take place within the wider children and young people's agenda. In Medway, the Young People's Joint Commissioning Group (Substance Misuse) provides this function and includes key representatives from the wider children's workforce who inform service development and identify need.

Medway drug and alcohol services are required to reduce the risk of harm to substance misusers in Medway and to the wider community. The aim is to meet all of the client's needs as opposed to addressing substance misuse in isolation. They are also required to reduce the potential for escalation of these clients' drug and alcohol related health problems. Young people's services provide prevention and early intervention services in order to help young people before problematic use becomes entrenched.

Service provision included within the current contact includes:

- Early intervention for vulnerable young people
- Named Drug Worker with the Youth Offending Team
- 1-1 support/treatment
- Prescribing and needle exchange services (with the aim of engaging in treatment to reduce/stop use)
- Drug Use Screening Tool (DUST) training for the wider children's workforce
- Consultation for professionals and parents/carers.

KCA have been our contracted provider since 2005. They continue to meet targets and achieve national and local requirements. They have received no uplift in funding to deliver services other than additional premises costs 3 years ago. The contract has not been subject to competition for 7 years. The re-tendering of young people's substance misuse services will enable a more up-to-date service specification and contract to be agreed enabling more robust contract monitoring and meet the wider key recommendations of the needs assessment conducted this year.

The contract for these services has evolved over time. The original contract for the core services has expired. Capacity within the Drug and Alcohol Action Team (DAAT) had been significantly reduced at the time the contract was due for review. A recent review of Young People's drug and alcohol provision has also identified that several small service level agreements have been developed as the needs of the population changed. All currently sit with the same agency along with the larger contract for services. These need to be consolidated into one contract. Re-tendering of this provision is essential.

The re-tendering of these services has been delayed by key factors:

Uncertainty over future funding levels – the Drug and Alcohol Action Team (DAAT) received grants from the Home Office and the Department of Health called the Pooled Treatment Budget (PTB) and was subject to change year on year. These grants are now part of the Public Health budget. The Youth Justice Board funded the YOT drug worker post with a grant of £39,539. This funding is now the responsibility of the Police Crime Commissioner and for 2013-14 this funding has continued. Local funding

from Medway Council makes up the rest of the DAAT Young People's budget. There is no indication that funding will be reduced. Public Health is required to report on the £140k from the Public Health ring fenced grant against nationally defined outcomes. However, should funding be reduced in the future the elements that could be reduced would be early intervention and training for the wider children's workforce.

Medway DAAT structure – The creation of Public Health England and for responsibility for public health initiatives, including DAATs, to pass to Local Authorities' Public Health Directorates. In June 2012, responsibility for adult drug and alcohol treatment services transferred to the Public Health Directorate. Young people's commissioning of substance misuse services stayed within the Children and Adult Directorate as part of the Partnership Commissioning Team.

The components of provision are set out in the Government Drug Strategy 2010, Reducing demand, Restricting Supply, Building Recovery: supporting people to live a drug free life. The key messages from this strategy regarding young people are as follows:-

Education and information for all

All young people need high quality drug and alcohol education so they have a thorough knowledge of their effects and harms and have the skills and confidence to choose not to use drugs and alcohol.

Early intervention for young people and families

Some young people face increased risks of developing problems with drugs or alcohol. Vulnerable groups - such as those who are truanting or excluded from school, looked after children, young offenders and those at risk of involvement in crime and anti-social behaviour, those with mental ill health, or those whose parents misuse drugs or alcohol - need targeted support to prevent drug or alcohol misuse or early intervention when problems first arise.

Intensive support for young people

For those young people whose drug or alcohol misuse has already started to cause harm, or who are at risk of becoming dependent, they will have rapid access to specialist support that tackles their drug and alcohol misuse alongside any wider issues that they face. Substance misuse services, youth offending, mental health and children's services must all work together to ensure this support is in place.

Public Health England (PHE), an executive agency of the Department of Health, has the following high level objectives that local Public Health Directorates will be required to deliver:-

- Prevent drug use
- Reduce risky behaviour in drug users
- Improve recovery from alcohol & drug dependency
- Reduce the harmful impact of alcohol on individuals and communities by fostering a culture where sensible drinking is an easy choice
- Support the delivery and commissioning of effective clinical services by local authorities and the NHS
- Reduce levels of hazardous and harmful drinking

Medway Joint Health & Well Being Strategy 2012-17 identifies that the harmful use of alcohol and drugs is one of six key risk factors which affect health and wellbeing and in order to give every child a good start improved prevention, treatment and care for young people misusing drugs is required.

Current Contract Status

The current contract arrangements for young people's substance misuse services expire at the end of March 2014. A comprehensive needs assessment has just been undertaken, including consultation with both internal and external stakeholders, and service users, to inform the content of the new specification/service requirements. A new specification is being written so that services are fit for purpose and in line with the 2010 Drug Strategy.

1.2 Council's Strategic Priorities And Core Values

The procurement of this requirement directly links into the following Council Strategic Priorities and Core Values:

Core Values

Putting our customers at the centre of everything we do.

This procurement requirement will deliver against the Core Value of 'Putting our customers at the centre of everything we do' through various workshops and consultations that are currently being held, involving service users, carers, operational frontline staff and various other stakeholders. The feedback will be reflected within the service specifications as well as the entire commissioning process.

Giving value for money

This procurement requirement will deliver against the core value of 'Giving value for money' by ensuring that savings are achieved while maintaining a good level of quality.

Strategic Priorities

Children and young people have the best start in life in Medway

This procurement requirement will deliver against the Strategic Priorities within the Children and Young People's Plan, ensuring that we identify and monitor substance misuse among children and young people and work in partnership to address this. Find out more about the amount of drug and alcohol use amongst children and young people and work together to reduce this.

Develop more effective links between drug and alcohol support and other services supporting children and young people so that they refer and access support appropriately.

1.3 Strategic Council Obligations

The procurement of this requirement directly links into the following Strategic Council Obligations:

Medway Council Plan & Sustainable Community Strategy 2010-26

The Council Plan and Sustainable Community Strategy acknowledge that Medway Council has a commitment to work with partners to ensure the most vulnerable children and young people are safe and will promote and encourage healthy lifestyles

for children and young people, reducing health inequalities and improving quality of life. Every child will have a good start in life with a commitment to reducing incidence of substance misuse including alcohol to reduce personal harm and public disorder.

1.4 Departmental and Directorate Service Plans

This procurement requirement links into the Children and Young People's Plan (CYPP) 2011 – 14 and its replacement the Joint Children and Young People's Commissioning Plan.

The provision of Young People's Substance Misuse services supports the key priority (4) highlighted within the CYPP, to help children and young people to maintain a healthy weight and good mental health. The current actions highlighted include:

- o identifying and monitoring substance misuse among children and young people and work in partnership to address/reduce this
- to develop effective links between drug and alcohol support and other services supporting children and young people so that they refer and access support appropriately
- o find out more about the amount of drug and alcohol use amongst children and young people and work together to reduce this.

2. BACKGROUND

2.1 Project Details

2.1.1 This procurement is a Services procurement requirement. This report seeks permission to commence the re-tendering of a current procurement contract with the proposed contract duration of three years with provision to extend for two years. The contract is proposed to commence on 1 April 2014 and conclude on 31 March 2017. The total value of this procurement contract re-tender is detailed in the exempt appendix. This procurement requirement is a standalone project with no linkage to any other procurement projects or procurement programmes.

2.2 Business Case

2.2.1 Procurement Project Outputs / Outcomes

As part of the successful delivery of this procurement requirement, the following procurement project outputs / outcomes within the table below have been identified as key and will be monitored as part of the procurement project delivery process.

Outputs / Outcomes	How will success be measured?	Who will measure success of outputs/outcomes?	When will success be measured
Provision of Young People's Substance Misuse Services in Medway	By provision of a successful contractor for the service.	Partnership Commissioning Team	Conclusion of the procurement process.
Successful mobilisation of the contract	Mobilisation plan outlined by the successful contractor met within pre-agreed timeframes	Partnership Commissioning Team	Throughout the mobilisation period.

Maximising value for money	By a direct cost comparison with previous service costs and comparison of service content.	Partnership Commissioning Team	Conclusion of procurement process and at the one year anniversary of the contract implementation
Provision of a good quality service	By an examination of KPIs / outcome measures and the providers on-going record in meeting the same.	Partnership Commissioning Team	Six month and one year anniversary of contract implementation
Appointing a provider that can deliver the service requirements	Tender process will undertake appropriate checks on companies. Performance and compliance visits, provider reports, service user surveys and feedback.	Partnership Commissioning Team	Measured throughout the procurement project in the first instance and thereafter as part of the performance monitoring schedule.
Customer Satisfaction	Service user surveys and feedback; level of complaints	Partnership Commissioning Team	Six month and one year anniversary of contract implementation

2.2.2 Procurement Project Management

This procurement project will be resourced through the following project resources and skills:

- A Steering group composed of the Young People's Substance Misuse Commissioning Lead, Service Manager (Partnership Commissioning – Children), Category Lead and other key stakeholders deemed appropriate will meet on a regular basis to discuss project progress and assist with decisionmaking.
- The Young People's Substance Misuse Commissioning Lead, assisted by a Partnership Commissioning Officer, will lead on the stakeholder consultations.
- Category Management assisted by the Young People's Substance Misuse Commissioning Lead will lead on Gateway 2 validation and the procurement process.

2.2.3 Post Procurement Contract Management

The contract management of this procurement project post award will be undertaken by the Young People's Substance Misuse Commissioning Lead. This will include monitoring performance against key performance indicators and outcome measures.

2.2.4 TUPE Issues

Further to guidance from Legal Services, Human Resources and the Category Management Team, it has been identified that TUPE may apply to this procurement process.

3. OPTIONS

In arriving at the preferred option as identified within Section 4.1 'Preferred Option', the following options have been considered with their respective advantages and disadvantages.

3.1 Do nothing

The option of doing nothing is not a viable option as the funding for the delivery of Young People's Community Substance Misuse Services has been in place for 7 years and not been subject to any form of competition in this time. To remove this funding and allow these services to lapse would have a detrimental impact on children and young adult in Medway. Doing nothing would mean that we are failing to deliver on a significant part of the Government's 2010 Drug Strategy. The service has not yet been tested on the open market in line with EU procurement rules.

3.2 In-house service provision

The option of providing this requirement in-house has been considered but is not a viable option. In-house services are likely to be more expensive than those on the open market due to higher on-costs.

3.3 Using another local authority to deliver procurement requirements

We have explored the option of procuring alongside Kent County Council however their young people's substance misuse services have already been re-commissioned in the last 18 months. We will continue to work with Kent in order identify future opportunities.

Below are the perceived advantages and disadvantages of using another local authority to deliver procurement requirements:

Advantages

- Possible synergies with similar services
- Efficiency savings through larger cost and volume contracts and harmonisation of monitoring and reporting requirements
- Reduction of resource requirements to manage the procurement requirements

Disadvantages

- Reduction in direct management and political control over procurement process
- Loss of Medway identity and ability to specify detailed requirements within a larger block contract

Medway Council have commissioned Kent County Council to procure and manage its adult DAAT services. There could be an opportunity to include the under 18s service and below are the advantages and disadvantages of this option. This option is not been recommended to Cabinet because officers' view is that the disadvantages outweigh the advantages. Also the recommendations from the recent needs assessment were for Medway to adopt a strategic partnership approach which would give the opportunity to re-engage key stakeholders, improve local understanding and ownership to better meet the range of needs, and to grow local capacity for targeted

prevention and early intervention through synergies with the wider children's workforce in Medway.

Advantages

- This negates the need for Medway Council to run a separate procurement exercise
- It could realise economies of scale for a contractor, therefore maximising the value for money for service users
- Medway Council are paying KCC £100k per annum to let and manage the adult contract
- The supply base for both adult and children services is the same, with approximately six key players in the market

Disadvantages

- Adult drug and alcohol consultation has already commenced: 07/10/2013
- Adult and young people's services requirements differ greatly due to young people receiving treatment primarily for cannabis and alcohol and the majority of adults in treatment services are for heroin and crack.
- The additional requirement would need to be negotiated with KCC as a contract variation
- Young people's drug and alcohol services are more effective when commissioned and delivered within a local integrated children's services framework
- Good practice is to meet young people's substance misuse needs as part of a broader package of care through formalised processes with the substance misuse service and partners
- The best outcomes occur when services such as CAMHS, Youth Offending Teams and Children's Social Care work together with substance misuse practitioners

3.4 Procurement via an EU compliant framework

No EU compliant frameworks have been identified from which Medway Council's procurement requirements can be satisfactorily delivered.

3.5 Formal tender process in line with EU Procurement Regulations.

The option of formally tendering this procurement requirement in line with EU Procurement Regulations has been considered because the value of this procurement requirement is above the EU Procurement Threshold for Services of £173,934. The advantages and disadvantages of this option are outlined below:

Advantages

- A formal tender process provides the opportunity to achieve cost savings through a competitive process
- This procurement project will ensure that the successful contractor is able to respond to and meet the needs of children and young people in Medway
- The Council will have greater cost certainty following the tender
- An outcome based specification will allow innovation and flexibility of provision including the option for collaborative bids

- A formal tender process allows officers the opportunity to renew and vary the specifications for these services
- Undertaking a tender process the Council means it would be compliant with the requirements of the EU Procurement Directives, the Public Contract Regulations 2006, as amended, and the Council's internal Contract Procedure Rules
- The service has not yet been tested on the open market in line with EU procurement rules.

Disadvantages

 There are no disadvantages to running a tender process in line with the EU Procurement Directives

3.6 Internal Medway Council Collaboration between departments

The option of procuring requirements through internal collaboration between Medway Council departments in order to exploit economies of scale and synergies has been considered but no such opportunities exist.

3.7 External public sector collaboration (e.g. other Councils, Fire Service, PCT, Police)

The option of procuring requirements through external collaboration between Medway Council and other external public sector organisations in order to exploit economies of scale and synergies has been considered but no such opportunities exist.

We have explored the option of procuring alongside Kent County Council. As outlined in section 3.3, Young People's services have already been re-commissioned in the last 18 months. It would not be appropriate to collaborate with the outsourcing of DAAT to Kent County Council for Adult services because the service requirements differ greatly.

3.8 Private sector collaboration e.g. Private Public Partnering/Private Finance Initiatives

The option of procuring requirements through private sector collaboration between Medway Council and other external private sector organisations has been considered but no such opportunities exist.

3.9 Procurement via a below EU Threshold Select List

No below EU Threshold compliant Select Lists have been identified from which Medway Council's procurement requirements can be satisfactorily delivered.

3.10 Other alternative options

No other alternative options have been considered.

4. ADVICE AND ANALYSIS

4.1 Preferred option

Further to an extensive review of procurement options above, the preferred option is 3.5 and is recommended to the Cabinet, with the following justification for this recommendation:

- a. It will subject the current service to competition for the first time in 7 years
- b. No other viable options exist
- c. Complies with the EU Procurement Directives and Medway Councils internal Contract Procedure Rules

4.2 Equality Act 2010 and The Public Services (Social Value) Act 2012

When considering making changes to any service provision, the Council must have due regard to its equalities duties set out in section 149 of the Equality Act 2010. The general duty on the Council is to have due regard to the need to eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Act, to advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it and to foster good relations between persons who share a relevant protected characteristic and persons who do not share it. The relevant protected characteristics are age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex and sexual orientation. Cabinet should be aware that the duty is not to achieve the objectives or take the steps set out in section 149. The duty on public authorities is to bring these important objectives relating to equality into consideration when making decisions. "Due regard" means the regard that is appropriate in all the circumstances.

The procurement project has been subject to a Diversity Impact Assessment Screening Tool (attached as appendix A). The procurement of this project will not have an adverse effect on the equality of access to the volunteer centre service or voluntary sector support service.

The Public Services (Social Value) Act 2012 requires local authorities to consider at the pre-procurement stage of any services contract (1) how what is proposed to be procured might improve the economic, social and environmental well-being of their areas and (2) how the local authority might act with a view to securing that improvement in conducting the procurement process.

The Council's General Conditions of Contract will be incorporated into the contract for this service which provides the required adherence to the provisions of the Equality Act 2010. Officers will ensure that the Council's equalities policy will be followed during the proposed procurement process, including relevant evaluations of provider's own policies and abilities to meet necessary requirements.

4.3 Corporate Sustainability Plan

The procurement project will be delivered in line with the Corporate Sustainability Plan and will be in accordance with all relevant health and safety legislation. Tenderers will

be requested to submit relevant Health and Safety Policies or demonstrate that they meet the standards of accreditation bodies.

5. RISK MANAGEMENT

5.1 Risk Categorisation

The following risk categories have been identified as having a linkage to this procurement project:

Risk Categories	Outline Description	Risk Impact I=Catastrophic II=Critical III=Marginal IV=negligible Impact	Risk Likelihood A=Very High B=High C=Significant D=Low E=Very Low F=Almost Impossible	Plans To Mitigate Risk
Procurement process	Council decision making process affects programme, resulting in delays and cost increases.	III	С	Projects are planned with realistic timetables and Procurement and Cabinet dates in mind to minimise delays.
	Failure to secure a new contract in time for the expiration of the current contract.	III	С	Officers will closely manage the procurement process and timetable in order to minimise any potential slippage.
	A challenge from an unsuccessful tenderer.	III	С	Officers will compose a robust and transparent evaluation process, provided to all tenderers within the tender documentation.
Contractual delivery	Appointment of a provider that fails to deliver the required level of service.		D	The specification will clearly prescribe the required level of service provision, and the evaluation procedure will be drafted to ensure that only the most capable and appropriate provider is appointed. Inclusion of regular contract monitoring procedures within the contract documents. Default clauses are part of the contract

Service delivery	Lack of specified performance	III	E	A detailed specification with key milestones and performance indicators and outcome measures will be produced. Performance will be monitored by the
				Partnership Commissioning Team. Reviews will be completed at 6 and 12 months in the first year of the contract.
Reputation / political	The needs of service users will not be met by the new service	III	E	Service user input will be reflected in the new specification and has already been considered as part of the needs assessment that underpins the service specification.
Financial	Possibility of tender submissions costing more than the Council can afford	II	В	Officers will incorporate cost criteria in the evaluation process. The tender will provide a ceiling for the expected contract price.

6. CONSULTATION

6.1 Internal (Medway) Stakeholder Consultation

A comprehensive needs assessment has been conducted that made the following key recommendations:-

- Adopt a strategic partnership approach the needs assessment and the
 planned re-tendering of young people's substance misuse services should be
 used as an opportunity to re-engage key stakeholders, improve local
 understanding & ownership of the issue, and better meet the range of needs
 identified now and in the future.
- Grow capacity for targeted prevention & early intervention agree the triggers for vulnerability and focus efforts to prevent substance misuse with priority groups, training up teams working with these young people already to use evidence-based approaches to intervene early.
- Create & embed pathways for complex cases formalise an approach that clarifies who does what, and how to work together, when highly vulnerable and at risk young people are also using drugs or alcohol.
- Transitions that are fit for purpose 18 to 24 year olds needs may be better
 met by developing an alternative pathway from the current one into adult
 services that better reflects their vulnerabilities and history of substance
 misuse.

- Maximise brief intervention opportunities a new approach to supporting occasional users of cannabis and ecstasy is needed to get the most out of these opportunities by using proven brief interventions approaches.
- 6.1.1 As part of this procurement project, the following internal stakeholder consultation is required before the commencement of the procurement project in order to direct the specification: a comprehensive needs assessment has been conducted focusing on key internal stakeholders, such as Children's Social Care, Children & Adolescent Mental Health Service (CAMHS), , Integrated Youth Support Service (IYSS which includes the Youth Offending Service (YOT)) and Integrated Prevention Service (IPS).
 - Consultation with colleagues from Children's Services, Service Managers across Children and Adult Directorate and Public Health Directorate to discuss what is going well, and any perceived gaps within the current service.
 - A steering group will be established to manage the re-commissioning process, which will include representation from all relevant stakeholders.
- 6.1.2 As part of this procurement project, the following internal stakeholder consultation is required during the procurement process in order to aid the evaluation process:
 - Again, as part of this procurement project, officers will be consulting closely with relevant service managers during the procurement process.
- 6.1.3 As part of this procurement project, the following internal stakeholder consultation is required post procurement/tender award in order to aid the contract management process:
 - The relevant officers in either the Partnership Commissioning Team or Category Management Team will be consulting with the relevant service managers and operational staff with regard to post award contract monitoring.

6.2 External Stakeholder Consultation

- 6.2.1 As part of this procurement project, the following external stakeholder consultation is required during the procurement process in order to direct the specification: a comprehensive needs assessment has been conducted which consulted with external stakeholders that work with young people who are vulnerable to substance use, the wider children's workforce in relation to prevention and young people.
- 6.2.2 As part of this procurement project, the following external stakeholder consultation is required during the procurement process in order to aid the evaluation process: involving young people by including them on a panel to which candidates present.
- 6.2.3 As part of this procurement project, the following external stakeholder consultation is required post procurement/tender award in order to aid the contract management process.
- 6.2.4 Feedback will be routinely sought from users and stakeholders by the provider as part of their quality assurance systems and the Partnership Commissioning Team as part of their contract management process.

7 PROCUREMENT BOARD

7.1 The Procurement Board considered this report on 13 November 2013 and supported the recommendations set out in paragraph 9 below.

8 FINANCIAL AND LEGAL IMPLICATIONS

8.1 Financial Implications

- 8.1.1 It is anticipated that this procurement requirement and its associated delivery as per the preferred option highlighted at Section 4.1 'Preferred Option' and the recommendations at Section 9, will be met from the existing budget for young peoples substance misuse.
- 8.1.2 Detailed finance and whole-life costing information is contained within section 2.1 Finance and Whole-Life Costing of the Exempt Appendix.

8.2 Legal Implications

8.2.1 The decision to commence procurement is a decision that Cabinet may properly take in accordance with the Council's constitution.

8.3 Procurement Implications

- 8.3.1 This procurement requirement and its associated delivery as per the preferred option highlighted at Section 4.1 'Preferred Option' and the recommendations at Section 9, has the following procurement implications which the Cabinet must consider.
- 8.3.2 This requirement is above the EU Procurement Threshold for Services of £173,934.00 and is Part B services and is therefore subject to the principles of open and fair competition. The proposed option also complies with the Councils procurement rules. Subjecting this requirement to open competition also ensure the council demonstrates best value by testing the market. There is a healthy level of competition within this market from third sector providers.

8.4 ICT Implications

8.4.1 This procurement requirement does not have any ICT implications.

9 RECOMMENDATIONS

- 9.1 Cabinet is recommended to approve the procurement of a comprehensive drugs and alcohol service in Medway, as set out in the preferred option at paragraph 4.1 of the report, that includes:-
 - Early intervention for vulnerable young people
 - Targeted prevention and brief interventions to priority groups, including under 14s
 - Named Drug Worker within the Youth Offending Team
 - One-to-one support/treatment
 - Prescribing and needle exchange services (with the aim of engaging in treatment to reduce/stop use)

- Training for the wider children's workforce to intervene early, including Drug Use Screening Tool (DUST)
- Consultation for professionals and parents/carers
- Defined processes to ensure that the Child Assessment Framework (CAF) and Team around the Child (TAC) are followed
- A robust transition policy for 18 year olds transferring to adult services
- Protocols for working with mental health services for those young people with dual diagnosis.

10 SUGGESTED REASONS FOR DECISION(S)

10.1 In addition to the justification set out in point 4.1 above, the proposed procurement will provide an opportunity to demonstrate best value by testing the market

Lead officer contact:

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Background papers

The following documents have been relied upon in the preparation of this report:

Description of document	Location	Date
The Council Plan 2013-2015	http://www.medway.gov.uk/pdf/	April 2013
	Council%20Plan%20Medway.	-
	<u>pdf</u>	
Sustainable Community Strategy 2010-	http://www.medway.gov.uk/cou	2010
26	ncilanddemocracy/performanc	
	eandpolicy/localstrategicpartne	
	rship/sustainablecommunitystr	
	ategy.aspx	

Directorate C and A	Name of Function or Policy or Major Service Change Young People's Community Substance Misuse Services				
Officer responsible for	assess	sment	Date of assessment	New or existing?	
Suzanna Taylor			16.10.13	New	
Defining what is be	ing as	sessed			
purpose and objectives They converged received premises has not be time, but on 31.03 Action Teat the time, young per undertake level agree population same agree service. The objectives T		ave been our contracted provider since 2005. Ontinue to meet targets and achieve what is d both nationally and locally. They have and no uplift in funding, other than additional es costs 3 years ago, to deliver. The contract to been subjected to competition for 7 years. Intract for these services has evolved over ut the contract for the core services will expire 03.14. Capacity within the Drug and Alcohol Team (DAAT) had been significantly reduced time the contract needed a review. A review of people's drug and alcohol provision has been aken. This identified that several small service greements have developed as the needs of the tion changed, which all currently sit with the agency, along with the larger contracted			
		combine duplication ensure a of the local Children and Ado Services young persupport/of These of the support/of	The objective of the change is to enable one combined service to be contracted which will reduce duplication, improve consistency and synergies and ensure a more responsive service to meet the needs of the local community. Children's Social Care, Youth Offending Team, Child and Adolescent Mental Health, Schools and Youth Services and other agencies engaged with vulnerably young people will benefit from the additional support/capacity that these specialist services offer. These organisations and individuals will benefit from the support, information, advice and opportunities		
3. What outcomes ar wanted?	е	The interto be developed One spesserve Memore cos	cialist service, with mu edway that can be effective and is tailor the organisations that	Itiple components, to ctively monitored, is ed to all local needs	

4. What factors/forces	Cor	ntribute	e:	Detract
could contribute/detract from the outcomes?	Rott	ter val	ue for money	Smaller agencies may
from the outcomes?	Bett	ter qua	ality service	find it more difficult to be able to provide the full range of services offered
	Cohesive service reducing duplication and communication. A combined service is easier to provide due to capacity and as a result this could result in economies of scale and a more seamless service to the user. This is not one of the protected characteristics of this DIA.			under the combined service. This is not one of the protected characteristics of this DIA.
5. Who are the main stakeholders?	Children's Services, Youth Offending Team, Child and Adolescent Mental Health, Schools provision. All services working with vulnerable young people.			
6. Who implements this and who is responsible?	Helen Jones is the Assistant Director responsible for Partnership Commissioning; Victoria Marshall is the			
	Head of Partnership Commissioning (Children's Services); Suzanna Taylor, Young People's Substance Misuse Lead Officer is responsible for the			
	commissioning and monitoring of the contract.			
Assessing impact				
7. Are there concerns that there <u>could</u> be a differential		YES	and community	open to all local voluntary groups in Medway.
impact due to racial/ethnic groups?				not be due to race or he new provider will be
groups:	1	NO	committed to rac	cial equality. The provider size will be committed to
What evidence exists for	N	Monito		will ensure appropriate
this?				of the community.
8. Are there concerns that there <u>could</u> be a differential impact due to <i>disability</i> ?		YES	and community	open to all local voluntary groups in Medway. not be due to disability.
impact due to disability?		NO		be committed to the
What evidence exists for this?	The contract will support all voluntary and community organisations in Medway. Monitoring mechanisms will ensure appropriate reach across all sectors of the community.			
9. Are there concerns that there <u>could</u> be a differential		YES	and community	open to all local voluntary groups in Medway.
impact due to gender?	<u> </u>	NO		not be due to gender. er will be committed to
What evidence exists for	1	The co	ntract will suppor	t all voluntary and

this?	community organisations in Medway. Monitoring mechanisms will ensure appropriate reach across		
	all sectors of the community.		
10. Are there concerns there could be a differential impact	YES	Services will be open to all local voluntary and community groups in Medway.	
due to sexual orientation?	NO	Assessment will not be due to sexual orientation. The new provider will be committed to equal access.	
What evidence exists for this?	The contract will support all voluntary and community organisations in Medway. Monitoring mechanisms will ensure appropriate reach across all sectors of the community.		
11. Are there concerns there could be a have a differential	YES	Services will be open to all local voluntary and community groups in Medway.	
impact due to religion or belief?	NO	Assessment will not be due to religion or belief. The new provider will be committed to equal access.	
What evidence exists for this?	The contract will support all voluntary and community organisations in Medway. Monitoring mechanisms will ensure appropriate reach across all sectors of the community.		
12. Are there concerns there could be a differential impact	YES	Services will be open to all local voluntary and community groups in Medway.	
due to people's age?	NO	Assessment will not be due to age. The new provider will be committed to equal access.	
What evidence exists for this?	The contract will support all voluntary and community organisations in Medway. Monitoring mechanisms will ensure appropriate reach across all sectors of the community.		
13. Are there concerns that there could be a differential	YES	Services will be open to all local voluntary and community groups in Medway.	
impact due to being trans- gendered or transsexual?	NO	Assessment will not be due to being transgendered or transsexual. The new provider will be committed to equal access.	
What evidence exists for this?	commo	unity organisations in Medway. Monitoring unisms will ensure appropriate reach across tors of the community.	
14. Are there any other	an sec	If yes, which group(s)?	
groups that would find it difficult to access/make use of the function (e.g. speakers	YES	, g. e ap(e).	
of other languages; people with caring responsibilities or dependants; those with an offending past; or people living in rural areas)?	NO		
What evidence exists for this?	The contract will support all voluntary and community organisations in Medway. Monitoring mechanisms will ensure appropriate reach across all sectors of the community. The new provider will ensure that staffing represents the local community and needs.		
15. Are there concerns there could be a have a differential	YES	Services will be open to all local voluntary and community groups in Medway.	
	i .	1	

impact due to <i>multiple</i> discriminations (e.g. disability <u>and</u> age)?	NO	Assessment will be due to whether they are a local voluntary and community group or organisation. The new provider will be committed to equal access.
What evidence exists for this?	The contract will support all voluntary and community organisations in Medway. Monitoring mechanisms will ensure appropriate reach across all sectors of the community.	

Concl	usions & recommend	ation			
16. Co	uld the differential	YES	There are no differential impacts identified		
impact	s identified in	150			
questi	ons 7-15 amount to				
	eing the potential for	NO			
	e impact?				
	n the adverse impact	\/F0	N/A		
be justified on the grounds		YES			
of promoting equality of					
opportunity for one group?		NO			
Or another reason?					
Recommendation to proceed to a full impact assessment?					
This function/ policy/ service change complies with the requirements of the legislation and there is evidence to show this is the case.					

Action plan to make Minor modifications						
Outcome	Acti	ons (with date of completion)	Officer responsible			
Planning shood: Peminders for the next review						
Planning ahead: Reminders for the next review						
Date of next review						

Areas to check at next review (e.g. new census information, new legislation due)			
Is there another group (e.g. new communities) that is relevant and ought to be considered next time?			
Signed (completing officer/service manager)		Date	
Suzanna Taylor		16.10.13	
Signed (service manager/A	Date		
Victoria Nystrom-Marshall	18.10.13		

NB: Remember to list the evidence (i.e. documents and data sources) used