

CABINET

4 APRIL 2017

GATEWAY 1 PROCUREMENT COMMENCEMENT: ADULT SUBSTANCE MISUSE SPECIALIST TREATMENT SERVICES RECOMMISSIONING

Portfolio Holder: Councillor David Brake, Adult Services
Report from: Dr Andrew Burnett, Director of Public Health
Author(s): Peter Gates, Programme Manager Substance Misuse and
Domestic Abuse

SUMMARY

‘Every £1 spent on drugs treatment saves society £2.50’
Home Office Research Report 23, 2009

This report seeks permission to commence the procurement of an adult substance misuse specialist treatment services. This Gateway 1 report has been approved for submission to the Cabinet after review and discussion at Public Health Directorate Management Team Meeting on 14 February 2017 and Procurement Board on 15 March 2017.

The Public Health Directorate Management Team has recommended that this project be approved as a Category B, High Risk procurement.

The political and/or service sensitivities are :

- The proposal will involve change to the current organization of specialist services and interventions for adult substance misusers in Medway that may affect delivery of key successful outcomes for adults affected by substance misuse.
- The current treatment system design has been affected by the delivery of service efficiencies over the contract length - future reduced budget availability will inform and influence expectations about key performance indicators and outcomes for service delivery.
- The changes in treatment system design will enable a focus on key changing priorities for specialist substance misuse service provision including: improved resources for adults affected by harmful alcohol use; increasing the availability of online interventions and service access.
- The continued successful delivery of specialist treatment and interventions is integral to the delivery of key partners (in particular: children’s and adult social care) criminal justice; health own interventions and targets due to the significant influence of problematic substance misuse on behavior (*for example, engaging parents in effective drug treatment improves parenting outcomes; engaging offenders in effective drug treatment reduces reoffending*).

1. BACKGROUND INFORMATION

1.1 Budget and Policy Framework

- 1.1.1 Funding for the provision of a specialist substance misuse treatment service for adults forms a component of the Public Health Grant that is given to Local Authorities by Central Government. The contract has delivered efficiency savings year on year since initial contract award, with a 24% reduction achieved since 2014.
- 1.1.2 The new contract will enable further efficiencies to be delivered whilst ensuring that performance against national Public Health Outcome Framework, local key performance indicators and the experience of local adults who want to recover from problematic substance misuse are all improved.
- 1.1.3 The annual budget has delivered service efficiencies during the current contract. The estimated total funding for future service provision available at this point in the commissioning process is £2m per annum, subject to further demands on Medway Council resources.
- 1.1.4 Effective delivery of specialist services and interventions for adults involved in problematic substance misuse contributes to a wide range of local and national policies and priorities including:
- Medway Council Plan– children and young people have the best start in Medway; Adults maintain their independence and live healthy lives.
 - Medway Safeguarding Children Board Plan - Priority One: To improve the life chances of children living with family members with mental health, substance misuse or disabilities.
 - The Medway Community Safety Plan.
 - Public Health England's Public Health Outcome Framework.
 - National Crime Prevention Strategy.
 - National strategies in relation to alcohol misuse and drugs misuse, including the Government Recovery strategy.
 - The Kent Police and Crime Commissioner priorities.
- 1.1.5 By ensuring that treatment for adult substance misusers is available and effective, a significant contribution can be made to the reduction of offending in Medway, reducing anti social behaviour, supporting Medway Council early intervention services (including reducing numbers of children moving in to higher threshold care services) alongside directly supporting acute and community based health services in the management of a complex cohort of patients associated with long term health problems.
- 1.1.6 Furthermore, effective specialist treatment provision contributes to Medway Council and community members concerns in regard to

domestic abuse, alongside street homeless and street drinker populations.

- 1.1.7 The current contract length ends on 30 June 2018, having been agreed on a 3 years plus one year basis. However, the current provider has stated that they wish to continue to deliver a service until 31 March 2018. Therefore, the Council will offer a new contract start date of 1 April 2018.

1.2 Service Background Information

- 1.2.1 Medway has an estimated 1,100 adults engaged in the use of opiates and crack cocaine alongside significant numbers of higher risk / dependent alcohol users and higher risk (a projected 14,896 individuals). Medway is also estimated to have significant numbers of higher risk / dependent alcohol users and higher risk (a projected 14,896 individuals) who have no contact with specialist alcohol services in the area. The current provider is delivering successful outcomes for opiate and alcohol users but performance could be further improved via recommissioning services and support that further engage adults involved in problematic drug and alcohol use in sustained recovery from dependency.
- 1.2.2 Medway Council currently commissions an integrated specialist substance misuse treatment service for adults aged 18 years and above who live in the Medway area. The current contract was awarded to Turning Point Services Limited in 2014 following a robust tendering process; the contract is due to end on 31 March 2018.
- 1.2.3 The community based service delivery currently includes a range of interventions including: substitute prescribing for opiate users; community detoxification for dependent alcohol users; access to residential rehabilitation and in patient detoxification services; group work and individual sessions to support and enable recovery from dependent drug and alcohol misuse; access to community based projects that enable recovery and access to Education, Training and Education programmes; needle and syringe exchange programmes. The service also directly contributes to reducing drug related deaths and harms (for example, reducing Blood Borne Virus transmission).
- 1.2.4 A robust and thorough needs assessment and review will be completed to inform and support final treatment system design.
- 1.2.5 The tender for a new arrangement of services and interventions will include:
- An engagement and assessment service that includes access to clinical prescribing services.
 - A provider of access to community based groups and resources that support the recovery from problematic and dependent drug and alcohol use and enable sustained recovery.
 - A renewed focus on engaging problematic alcohol users in services and interventions that address harmful drinking.

1.3 Urgency of Report

- 1.3.1 The Contract is required to be awarded by the end of December 2017, to enable the transition to a transformed specialist treatment service arrangement to be in place by 1 April 2018.

1.4 Funding/Engagement From External Sources

- 1.4.1 Whilst the Police and Crime Commissioner makes an annual direct contribution of £59,042 towards the cost of the specialist treatment service provision in Medway, a number of key stakeholders – including criminal justice services (Kent Police ; SETEC), Medway social care services, acute and community based health services are engaged in supporting the delivery of the specialist service. Stakeholders are invited to attend the quarterly Medway Drug and Alcohol Action Team meetings, chaired by Medway Public Health Department.

1.5 Parent Company Guarantee/Performance Bond Required

- 1.5.1 A parent company guarantee will be sought where appropriate.

2. PROCUREMENT DEPENDENCIES AND OBLIGATIONS

2.1 Project Dependency

- 2.1.1 The procurement will have dependencies with a range of services commissioned by NHS Medway CCG, Medway Council and NHS England. Dependencies include future recommissioning of adult acute and community health services; adult mental health services; supported housing services; early intervention services.

2.2 Statutory/Legal Obligations

- 2.2.1 The Health and Social Care Act 2012 transferred responsibility for delivery of specialist treatment services for substance misuse from health to the local authority. The Act is also the basis for the ring fenced Public Health Grant to Local Authorities to meet the responsibilities under the Act; a Local Authority Circular on Public Health conditions (LAC(DH)(2014) 2) stipulates that ' a local authority must in using the grant , have regard to the need to improve the take up of and outcomes from, its drug and alcohol misuse services'.
- 2.2.2 The Local Authority has a statutory duty to carry out assessments and arrange provision to meet needs where eligible and appropriate (NHS and Community Care Act 1990; Care Act 2014).
- 2.2.3 The Children's Act (1989) places a responsibility to 'safeguard and promote the welfare of children within their area' – adult substance misuse services directly contribute to this responsibility through working with parents.

3. BUSINESS CASE

3.1 Procurement Project Outputs / Outcomes

3.1.1 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?
1. Number of successful completions of drug treatment	The number of individuals who have successfully completed specialist drug treatment, abstaining from class A drug use and/or reporting significant reduction in overall drug use.	National Drug Treatment Monitoring System (NDTMS) and Public Health.	Quarterly Monitoring Quarterly NDTMS reporting Providers monthly performance reporting.
2. Number of successful completions of alcohol treatment	The number of individuals who have successfully completed specialist alcohol treatment, abstaining from alcohol use or reporting significant reduction in overall alcohol use.	National Drug Treatment Monitoring System and Public Health.	Quarterly Monitoring Quarterly NDTMS reporting Providers monthly performance reporting.
3. Number of completions who re present for drug treatment.	The number of adults who have successfully completed treatment and re present for specialist treatment within 6 months of treatment completion.	National Drug Treatment Monitoring System and Public Health.	Quarterly Monitoring Quarterly NDTMS reporting Providers monthly performance reporting.

4. Number of substance misusers accessing specialist treatment services	The number of individuals aged 18 years and above who access specialist treatment services.	National Drug Treatment Monitoring System and Public Health.	Quarterly Monitoring Quarterly NDTMS reporting Providers monthly performance reporting.
5. Number of individuals waiting over 2 weeks for initial intervention	The number of individuals that have to wait for 2 weeks or above between initial contact with specialist treatment services and the first intervention offered.	National Drug Treatment Monitoring System and Public Health.	Quarterly Monitoring Quarterly NDTMS reporting Providers monthly performance reporting.

3.2 Procurement Project Management

3.2.1 Category Management will manage the procurement process working alongside Public Health. The new contracts for specialist treatment must be in place by 1 April 2018 to ensure continued delivery of services for adults engaged in clinical prescribing provision.

3.2.2 The overarching proposed timeline for the procurement is as follows:

March 2017	GW1 to DMT; Submission to Procurement Board.
April	Cabinet consideration and approval; SQ and related documents placed; market engagement events.
May	Evaluate SQ's and short list providers; Commence Dialogue phase.
June	Issue Invitation to Submit Final Offer
July	Tender Evaluation
September	Decision for consideration and approval from Procurement Board / Cabinet
October	Contract awarded
November	Providers informed of decision
January to March 2018	Mobilisation period

3.3 Post Procurement Contract Management

3.3.1 Medway Public Health will contract and performance manage the contract on behalf of Medway Council to ensure key outcomes are delivered and further efficiencies identified.

3.3.2 Contract management will include:

- Monthly performance reports
- Regular commissioner / provider liaison meetings
- Quarterly Performance Management meetings.
- Annual service review.

4. MARKET CONDITIONS AND PROCUREMENT APPROACH

4.1 Market Conditions

4.1.1 All Local Authorities continue to commission specialist treatment services for substance misusers, ensuring that there are a number of national providers (including third sector and NHS providers) who are actively interested in securing contracts in the South East.

4.1.2 The new approach to commissioning recovery orientated community resources has been successfully adopted by an increasing number of Local Authorities, including Essex County Council and East Sussex Council. NHS Medway CCG already purchases a range of resources from local community groups to enable and support recovery for adults with mental health problems.

4.2 Procurement Process Proposed

4.2.1 The procurement will be governed by the Public Contracts Regulations 2015. As the service is being re-designed the competitive dialogue process will be adopted, enabling the commissioners to engage with providers prior to inviting final tenders.

4.3 Evaluation Criteria

4.3.1 The evaluation will be weighted 70% for quality and 30% for price to deliver best value. A higher weighting is being attributed to the quality component of the service to ensure that standards are kept appropriate for this high risk service.

5. RISK MANAGEMENT

5.1 Risk Categorisation

1. Risk Category: Procurement Process	Likelihood: Significant	Impact: Critical
Outline Description: The commissioning timeline is not met, causing a delay in service implementation and possible service gaps as notice will have been served on current contracts, including gap in clinical provision for dependent opiate users.		
Plans to Mitigate: Regular communication, engagement and liaison between Public Health Programme Manager and lead Category Management officer to ensure timelines followed, issues/obstacles identified and mitigated prior to causing delays. Agree alternative commissioning Timeline that follows standard open tendering process in case of significant timeline slip places new contract start date and service mobilisation at risk.		
2. Risk Category: Procurement Process	Likelihood: Significant	Impact: Critical
Outline Description: There is a lack of applications from potential providers for the new service models during the procurement process.		
Plans to Mitigate: Public Health and Procurement will ensure a series of marketplace engagement events take place in Medway to ensure there is provider interest in the services to be tendered; service commissioners will liaise with other LA areas that have delivered successful similar change in the design and organisation of treatment services to identify key learning points.		
3. Risk Category: Service Delivery	Likelihood: Significant	Impact: Critical
Outline Description: The new services are not able to deliver services access, outputs and outcomes to the identified performance targets due to challenges that arise from initial implementation of a new treatment system.		
Plans to Mitigate: Establish a robust service delivery monitoring framework, including provider forum; stakeholder engagement forum; quarterly performance monitoring meetings with providers.		
4. Risk Category: Reputation / Political	Likelihood: Low	Impact: Critical
Outline Description: The new services fail to offer appropriate access, quality of service delivery and outcomes, affecting community and stakeholder perception of the Council as funders and commissioners of new specialist service provision.		
Plans to Mitigate: The new services will be monitored via regular performance monitoring meetings and reports; a client consultation forum will be established for the first year of the new treatment system contracts. Regular opportunities to engage with key stakeholders are in place.		

5. Risk Category: Finance	Likelihood: Significant	Impact: Catastrophic
Outline Description: Requirement to deliver efficiency savings from 2019 onwards may make continued delivery of commissioned services unsustainable.		
Plans to Mitigate: Public Health Department and partners will have ongoing focus on identifying future opportunities to deliver efficiencies within the contract alongside service providers; Public Health will work alongside partners to identify alternative revenue and funding streams from 2017.		
6. Risk Category: Other/ICT	Likelihood: Low	Impact: Marginal
Outline Description: Service transition between providers will involve transfer of individual client information between service providers, there may be technical or other difficulty that prevents and/or disrupts effective transfer. The potential to enable commissioned provider practitioners to have access to appropriate vulnerable adult records may affect transition to new treatment service system.		
Plans to Mitigate: Robust and effective transition planning and process will be established. Required protocols and working arrangements will be resolved with key partners in ICT and Social Care to enable and support appropriate information sharing.		

6. CONSULTATION

6.1 Internal (Medway) Stakeholder Consultation

6.1.1 As part of a commissioned Adult Substance Misuse Needs Audit and Treatment System Re Design project a number of key stakeholder representatives have been consulted on the service priorities and initial design, including social care and Community Safety Partnership. Further consultation will take place on the service specification for the new services with managers and practitioners, including Early Help and further discussion with children's and adults social care during Winter and Spring 2017.

6.2 External Stakeholder Consultation

6.2.1 Consultation with a range of external stakeholders – including adult social care services, criminal justice agencies, community mental health services and clients of the current specialist treatment provider – have informed the commissioned Adult Substance Misuse Needs Audit and Treatment System Re Design project. Further consultation will take place on the service specification for the new services with external stakeholders during Winter and Spring of 2017.

7. PROCUREMENT BOARD

7.1 The Procurement Board considered this report on 15 March 2017 and supported the recommendation set out in section 10 below.

8. SERVICE IMPLICATIONS

8.1 Financial Implications

8.1.1 The procurement requirement and its associated delivery as per the recommendations at Section 10, will be funded from existing revenue budgets.

8.1.2 Further detail is contained within Section 2.1 Finance Analysis of the Exempt Appendix.

8.2 Legal Implications

8.2.1 The Public Services (Social Value) Act 2012 gives the Council a statutory duty to consider at the pre-procurement stage of any service contract:

- How what is proposed to be procured may improve the economic, social and environmental well-being of their areas;
- How the Council may act with a view to securing that improvement in conducting the process of procurement.

8.2.2 The Act applies to all services contracts and service framework agreements, to which the Public Contracts Regulations 2015 apply).

8.3 TUPE Implications

8.3.1 TUPE will apply during this procurement. This will only apply to eligible posts within the current commissioned specialist treatment service.

8.4 Procurement Implications

8.4.1 As per the Contract Procedure Rules under Section 3.3.1 : 'All requirements above £100k must be advertised on the Council's website, the Kent Business Portal and in the OJEU'.

8.4.2 The value of the proposed service contract means the service must be advertised to comply with the Public Contracts Regulations 2015 and to support the Council's procurement strategy to provide best value.

8.5 ICT Implications

8.5.1 Services are currently delivered by one provider; work will need to be done during the mobilisation period to ensure robust and effective data transfer of individual client information and to identify and resolve Information Governance issues.

8.5.2 The method for data transfer will need to be agreed between Medway ICT and the appointed supplier. This will need to meet the security standards appropriate to the sensitivity of the data.

8.5.3 Support will be required from ICT to support potential access to vulnerable adult data held by Medway Council to directly inform and enable joint service and intervention delivery. This may also require support or the purchase of consultancy and development from the supplier of the adult service application.

9. OTHER CONSIDERATIONS

9.1 Diversity & Equality

9.1.1 A Diversity Impact Assessment has been undertaken. Based on the current and projected model and initial contract budget estimates no major concerns have been identified. This is set out in Appendix 1 to the report.

9.2 Social, Economic & Environmental Considerations

9.2.1 The services will make a direct contribution to addressing levels of inequality in Medway by supporting adults and families affected by substance misuse to access effective treatment provision. Adults will be directly supported in opportunities to access employment, training and education alongside other issues that enable recovery from dependent substance misuse. The services will contribute to a number of the Council's wider priorities including: children and young people have the best start in Medway; Adults maintain their independence and live healthy lives.

10. RECOMMENDATION

10.1 That the Cabinet approves the commencement of the procurement of new adult substance misuse specialist treatment services for Medway, on the basis set out in paragraph 4.2 of the report, with a contract start date of 1 April 2018.

11. SUGGESTED REASONS FOR DECISION

11.1 Specialist treatment for adult substance misusers delivered in community settings enables adults to engage in effective treatment that directly supports their recovery from problematic substance misuse, rebuilding relationships, improving outcomes for families engaged with Medway social care services, mental health services, community and acute health services and reducing involvement in offending behaviour. The provision also directly contributes to reductions in anti-social behaviour.

11.2 By commissioning specialist community based recovery resources and interventions, recovery can be sustained in a more robust and long lasting way, improving outcomes for individuals and families affected by problematic substance misuse and directly supporting the performance of key partners and stakeholders.

LEAD OFFICER CONTACT

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Department	Public Health	Directorate	Public Health
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APPENDICES

Appendix 1 – Diversity Impact Assessment

Exempt Appendix

BACKGROUND PAPERS

The following documents have been relied upon in the preparation of this report	Location	Date
Public Health Outcomes Framework (November 2016 Update)	Website: https://www.gov.uk/government/publications/public-health-outcomes-framework-2016-to-2019	Nov 2016

Diversity impact assessment

Appendix 1

TITLE <i>Name / description of the issue being assessed</i>	Adult Specialist Treatment for Substance Misusers Service Recommissioning
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DATE <i>Date the DIA is completed</i>	1/2/2017
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LEAD OFFICER <i>Name, title and dept of person responsible for carrying out the DIA.</i>	Peter Gates Programme Manager Substance Misuse and Domestic Abuse
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1 Summary description of the proposed change

- *What is the change to policy / service / new project that is being proposed?*
- *How does it compare with the current situation?*

The community based specialist adult substance misuse treatment service will be recommissioned in 2017, with changes made to the service design model to improve the experience of recovery for people in Medway with a drug or alcohol dependency alongside promoting closer inter agency/joint working with vulnerable adults (including parents). There will be a reduced funding resource available from Medway Council for the new service that will affect some aspects of service availability – for example, there will be smaller specialist trained staff available; there will be a reduction in specialist service premises from two to one.

The new service model will offer a renewed focus on the needs of adults involved with harmful and risky use of alcohol by improving access pathways and offering a more diverse range of treatment options.

The current service model offers a premises based clinically led service to clients, with a stable number of opiate dependent and alcohol dependent adults alongside a smaller cohort of non opiate drug users. Support is offered via individual and groupwork based interventions at the service premises. There is little evidence of effective joint working, particularly with high impact individuals and households – for example, street homeless adults, families involved with Medway Council's adult and children's social care provision. The service also offers interventions that are intended to support adults with supporting the recovery from substance dependency, via facilitating access to a range of community groups and resources.

The new service will continue to offer clinical interventions via a fixed service centre in Chatham; however, there will be a significant change in the experience for adults accessing services who wish to be supported with recovery by non specialist community resources and interventions alongside developing further opportunities with employment/training / education. Furthermore, specialist practitioners will proactively support joint interventions with statutory services for complex adults and families in a range of outreach settings including home visits.

2 Summary of evidence used to support this assessment

- *Eg: Feedback from consultation, performance information, service user records etc.*
- *Eg: Comparison of service user profile with Medway Community Profile*

- A needs audit and service redesign project commissioned by Medway Public Health Department has informed and supported the future service design.
- Submitted data on specialist provider performance in Medway.
- Consultation with key stakeholders and partners via Project Steering Group.

Diversity impact assessment

3 What is the likely impact of the proposed change?

Is it likely to :

- Adversely impact on one or more of the protected characteristic groups?
- Advance equality of opportunity for one or more of the protected characteristic groups?
- Foster good relations between people who share a protected characteristic and those who don't?

(insert ✓ in one or more boxes)

Protected characteristic groups	Adverse impact	Advance equality	Foster good relations
Age		Y	Y
Disability		Y	Y
Gender reassignment		Y	
Marriage/civil partnership		Y	
Pregnancy/maternity		Y	
Race			
Religion/belief			
Sex		Y	
Sexual orientation		Y	
Other (eg low income groups)		Y	

4 Summary of the likely impacts

- Who will be affected?
- How will they be affected?

- Adults who are referred to specialist treatment for substance misuse – will experience access to a wider range of community based resources that actively support recovery from dependency. There may be issues experienced in waiting times to access clinical prescribing programmes that are currently within national and local requirements due to reductions in staffing provision.
- Adults engaged in specialist treatment – particularly clinical prescribing services – will experience a change in availability of particular types of service delivery including one to one keywork sessions.
- Adults who misuse alcohol – will experience improved access to a range of appropriate interventions and resources to support reductions in alcohol use.
- Families of substance misusers including partners and children – will experience

Diversity impact assessment

improvements in joint service delivery and support to parents and partners who are involved in harmful substance misuse, including better liaison and communication between practitioners involved in support.

- Medway communities – will experience reductions in anti social behaviour including numbers of adults involved in street drinking; maintaining current low levels of drug related offending by opiate users.
- Practitioners from health, social care and criminal justice agencies – will experience improvements in communication; engagement; joint service delivery alongside specialist substance misuse treatment staff.

5 What actions can be taken to mitigate likely adverse impacts, improve equality of opportunity or foster good relations?

- *Are there alternative providers?*
- *What alternative ways can the Council provide the service?*
- *Can demand for services be managed differently?*

In regard to managing the potential adverse impact of reduced clinical capacity and possible increase in waiting times to access clinical interventions:

- The clinical service can only be delivered by an appropriately trained and qualified provider that meets relevant clinical safety standards, guidelines and requirements.
- Clinical interventions can be delivered via Medway GP's; however, evidence supports delivery via specialist provision delivers significantly improved outcomes for adults experiencing substance dependency issues.
- Initial presentations for clinical interventions place a demand on specialist provision that are challenging for management by non specialist services and providers.: clients present with range of clinical needs relating to physical dependency alongside complex social and healthcare needs.
- Develop additional capacity for groupwork session availability.
- Develop peer mentor/volunteer service capacity to offer regular one to one contact opportunities for adults accessing specialist treatment.
- Access to non clinical interventions will continue to be offered via regular open access sessions and opportunities to book individual appointments if appropriate.

6 Action plan

- *Actions to mitigate adverse impact, improve equality of opportunity or foster good relations and/or obtain new evidence*

Action	Lead	Deadline or review date
The commissioned specialist provider of clinical interventions will maintain ongoing appraisal of effective access to services for adults willing to engage in treatment to ensure waiting times are kept within national expectations.	Commissioner; service providers	Ongoing review via quarterly performance monitoring meetings.
Joint working arrangements will be agreed with providers of non specialist clinical services in Medway to develop options for treatment of non complex adults.	Commissioner; service providers.	By December 2018 and ongoing review
Provision of group work will be further developed alongside	Service providers	By October 2018

Diversity impact assessment

specialist service staff, peer mentors and volunteers to ensure diversity of resources available to different cohorts of substance misusers.		
Investment in provision that enable and supports recovery from dependency via pre existing resources in Medway via the voluntary sector, reducing numbers of long term clients in structured treatment.	Service commissioner ; recovery service provider	April 2018
Ensure service availability is delivered in an appropriate range of outreach settings (including homeless services; healthcare clinics and services; other settings) in line with changes in client need.	Service commissioner; clinical service provider	Ongoing review via quarterly performance monitoring meetings

7 Recommendation

The recommendation by the lead officer should be stated below. This may be:

- to proceed with the change, implementing the Action Plan if appropriate
- consider alternatives
- gather further evidence

If the recommendation is to proceed with the change and there are no actions that can be taken to mitigate likely adverse impact, it is important to state why.

The recommendation of the lead officer is to proceed with the changes described, implementing the Action Plan to ensure minimisation of potential adverse effects.

8 Authorisation

The authorising officer is consenting that:

- the recommendation can be implemented
- sufficient evidence has been obtained and appropriate mitigation is planned
- the Action Plan will be incorporated into the relevant Service Plan and monitored

Assistant Director

Date

Contact your Performance and Intelligence hub for advice on completing this assessment

RCC: phone 2443 email: annamarie.lawrence@medway.gov.uk

C&A: (Children's Social Care) contact your normal P&I contact

C&A (all other areas): phone 4013 email: chrismckenzie@medway.gov.uk

BSD: phone 2472/1490 email: corppi@medway.gov.uk

PH: phone 2636 email: david.whiting@medway.gov.uk

Send completed assessment to the Corporate Performance & Intelligence Hub (CPI) for web publication (corppi@medway.gov.uk)