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**Report of:** *John Doyle, Interim Executive Director People Services Portfolio*

**Report to:** *Cabinet*

**Date of Decision:** *18<sup>th</sup> June 2019*

**Subject:** *Young People Substance Misuse Services re-tender in Sheffield*

Is this a Key Decision? If Yes, reason Key Decision:-	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
- Expenditure and/or savings over £500,000	<input type="checkbox"/>	
- Affects 2 or more Wards	<input checked="" type="checkbox"/>	
Which Cabinet Member Portfolio does this relate to? <i>Children and Families</i>		
Which Scrutiny and Policy Development Committee does this relate to? <i>Healthier Communities and Adult Social Care</i>		
Has an Equality Impact Assessment (EIA) been undertaken?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
If YES, what EIA reference number has it been given?	589	
Does the report contain confidential or exempt information?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
If YES, give details as to whether the exemption applies to the full report / part of the report and/or appendices and complete below:-		

**Purpose of Report:**

In July 2018 Cabinet approved the 2018-22 Sheffield Drug Strategy which set out a partnership vision and action plan to tackle problems caused by drugs to individuals, families and communities.

This report, in line with the Strategy, sets out the proposed approach to recommissioning drug and alcohol treatment and support services for children and young people aged 10 to 18 in Sheffield separate to, and alongside the adult treatment service as part of an all age approach. The current contract ends on 31<sup>st</sup> March 2020 and falls within the council's public health duties.

**Recommendations:**

- That Cabinet approves the proposal to recommission young people's substance misuse services as set out in this report, to secure services for the support and treatment for the children and young people of Sheffield with substance use needs.
- That Cabinet delegates authority to the Director of Commissioning, Learning and Inclusion, in consultation with the Director of Finance and Commercial Services and the lead Cabinet Member for Children and Families, to agree the final procurement strategy and approve a contract award following the tender process.

**Background Papers:**

<b>Lead Officer to complete:-</b>		
1	I have consulted the relevant departments in respect of any relevant implications indicated on the Statutory and Council Policy Checklist, and comments have been incorporated / additional forms completed / EIA completed, where required.	Finance: Paul Jeffries
		Legal: Louise Bate
		Equalities: Bashir Khan EIA reference 589
	<i>Legal, financial/commercial and equalities implications must be included within the report and the name of the officer consulted must be included above.</i>	
2	<b>EMT member who approved submission:</b>	John Doyle
3	<b>Cabinet Member consulted:</b>	Cllr Jackie Drayton
4	I confirm that all necessary approval has been obtained in respect of the implications indicated on the Statutory and Council Policy Checklist and that the report has been approved for submission to the Decision Maker by the EMT member indicated at 2. In addition, any additional forms have been completed and signed off as required at 1.	
	<b>Lead Officer Name:</b>  Carol Fordham	<b>Job Title:</b>  Commissioning Manager: Vulnerable Children and Young People
	<b>Date: 17 June 2019</b>	

## 1. PROPOSAL

### Summary:

- 1.1 Sheffield City Council (SCC) is required to commission sufficient good quality treatment and support services for young people affected by problems with drugs and alcohol. Good quality drug and alcohol support and treatment services are proven to help to keep people safe, reduce harm, to identify their needs and to support them to achieve a positive outcome for themselves as individuals and the wider community. Treatment services support the reduction of crime and anti-social behaviour, improve young people's health, and support families to stay together and to keep children safe.
- 1.2 Public Health England states that there is evidence to suggest that young people who use recreational drugs run the risk of damage to mental health including suicide, depression and disruptive behaviour disorders. Regular use of cannabis or other drugs may also lead to dependence. Among 10 to 15 year olds, an increased likelihood of drug use is linked to a range of adverse experiences and behaviour, including truancy, exclusion from school, homelessness, time in care, and serious or frequent offending.
- 1.3 Current young people drug and alcohol treatment and support is commissioned by Sheffield City Council. In the course of an average 12 month period of delivery, around 200 children and young people receive structured treatment or targeted individual and group interventions, families of young people using substances are supported, and training is delivered to 500 professionals.
- 1.4 Sheffield performs well according to the public health profile:
  - Hospital admissions due to substance misuse 15-24 years 2015/16-2017/18 in Sheffield 126, 43.4 per 100,000, compared to regional 87.6 per 100,000 and national 87.9 per 100,000
  - Admission episodes for alcohol specific conditions, under 18s 2015/16- 2017/18 in Sheffield 61 admissions 17.5 per 100,000 compared with 33.4 per 100,000 in the Y&H region and 32.9 nationally
- 1.5 The Sheffield Drug Strategy sets out an 'all age approach' to recognising and responding to drug use in Sheffield, from education and prevention, to treatment and reducing crime. We will commission services as part of an overall framework of provision which can meet the needs of different groups, including children and young people and addressing the impact that substance use has on families.
- 1.6 However, it is important, for well-established clinical and safeguarding reasons that **clinical treatment services** for adults and children are delivered separately. The nature of drug and alcohol problems in children and young people have a very different profile to those of adults, and the support interventions are quite different. The UK drug misuse and dependence guidance states:

*'Specialist drug treatment and competencies for young people are different to those for adults. The treatment services that address young people's substance use problems need to sit within the wider framework and standards for young people that support both engagement and access of children and young people to services and appropriate responses to young people and their parents'.<sup>[1]</sup>*

- 1.7 Therefore the children and young people's treatment service will be commissioned separately but the processes will be linked in order to ensure there is a consistency of quality in the city, that bidders are able to respond to both published tenders during the same period, and that the contracts commence on the same date. Requirements will be put in place during both procurement processes that the successful bidders meet post award and ensure they work together and that their transitions approach from young people's into adult services, where necessary, is safe and comprehensive.
- 1.8 The Public Health Grant budget for the service is £300,000 per annum, The final budget on publication of the tender will include the reduction on current spend of the PH Grant that is required for the 20/21 period onwards and these savings will be reflected in the budget planning process with finance business partners. Resource will be scaled dependent on the final confirmed budget at the point of publication of the tender.

## **2. HOW DOES THIS DECISION CONTRIBUTE?**

- 2.1 The strategy will contribute to the Corporate Plan as follows:
- 2.2 The service will provide individual and group responses to children and young people with a range of substance misuse needs, and promote the achievement of positive outcomes for these individuals through reduced harm, engagement in services, and recovery from their substance use. They will also support parents/carers to support and manage their children who are using substances in a safe and effective way. This will allow us to meet the best practice in current clinical guidelines.

### An in touch organisation

- 2.3 The service specification has been developed through consultation with key stakeholders to sustain effective provision through integration with early intervention and specialist services. The service will be accessed by self-referral, family referral and referral from professionals/settings, and will be designed by and with commissioners, providers, and service users, to meet current and future need of young people using substances.
- 2.4 Digital resources including social media and provider website will be used to offer immediate access to information around the clock and signposting to local support. In line with the Sheffield Drug Strategy, the service will seek to

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<sup>[1]</sup> <https://www.gov.uk/government/publications/drug-misuse-and-dependence-uk-guidelines-on-clinical-management>

understand the diverse needs of children and young people using substances, and deliver a whole family flexible support response in line with best practice evidence and which responds to emergent substance use issues quickly and effectively.

### Strong economy

- 2.5 The cost of drug and alcohol use to individuals, communities, their families and children, and the pressure it places on services is significant.
- 2.6 The annual cost of illicit drug use in the UK is around £10.7 billion a year, and the annual cost of alcohol related harm in England is £21.5 billion a year. These costs include lost economic productivity, crime, policing and NHS.<sup>1</sup>
- 2.7 It is in the interests of the national and local economy that good quality substance use treatment is in place, with a focus on early intervention and prevention with young people. The service will provide a screening tool for young people, their families and professionals to assess need, hosted on a digital platform, with harm reduction information and details of services. This will help children and young people access treatment at an early stage and help prevent the poor life outcomes associated with substance misuse, which impact on economic attainment for them and their families, as well as the local economy.

### Thriving neighbourhoods and communities

- 2.8 Substance use can impact on community safety significantly, with anti-social behaviour, offending, public consumption and intoxication, litter, and visible drug dealing all being issues that cause problems for communities in the city. Children and young people are vulnerable to exploitation by organised crime groups to use and sell drugs for financial profit. The service will target these communities and individuals by working closely with the organisations that can identify them.
- 2.9 The service will continue to be embedded in the Youth Justice Service and provide targeted support to prevent and respond to child criminal exploitation. Investment in substance use services has a significant impact on reducing offending and its associated costs to society:
- 2.10 Drug and alcohol treatment in England in 2016/17 resulted in 4.4 million fewer crimes:
- 44% reduction in the number of dependent individuals re-offending;
  - 33% decrease in the number of offences committed.

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<sup>1</sup> <https://www.gov.uk/government/publications/alcohol-and-drug-prevention-treatment-and-recovery-why-invest/alcohol-and-drug-prevention-treatment-and-recovery-why-invest>

- 2.11 The majority of referrals through the Youth Justice Service are from the Police for young people using cannabis who are offered intervention by the substance misuse service as part of a restorative response that avoids criminalising children.

#### Better health and wellbeing

- 2.12 The proposed service has a positive impact on individuals' physical, mental and emotional wellbeing.
- 2.13 Drug related deaths are increasing nationally, which is mirrored locally. The reasons for this are numerous, and go beyond overdose deaths: it includes an aging cohort of opiate users experiencing poor physical health, and often respiratory issues, blood borne viruses, liver problems, and mental ill health resulting in an increase in death by suicide among people using substances.
- 2.14 All evidence shows that being in treatment is the single most significant protective factor against drug related deaths. Intervening in earlier life will help reduce the number of people who go on to develop long term health problems related to substance use.
- 2.15 46% of children and young people who accessed support from the substance misuse service last year were affected by domestic abuse, 48% had experience of self-harm, 52% reported mental health issues and 35% had experience of parental substance use.
- 2.16 The service will be easily accessed by young people through links with the Youth Information Advice and Counselling Service offering young people aged 13-25 direct access to emotional wellbeing support. Substances are often used as a coping strategy for psychological distress and through drop-in and duty response, the substance misuse service can respond to young people's needs at an early stage.

#### Tackling inequalities

- 2.17 Substance use impacts individuals, families, children, and communities. The impact is disproportionate in some areas of the city, with deprived communities experiencing higher levels of substance use related harm. Ensuring that there is good quality, accessible treatment in Sheffield, will make a significant contribution to reducing these harms. Intervention in children's and young people's lives helps prevent future parental substance use contributing to Adverse Childhood Experiences (ACEs) and poorer outcomes for future children and families.

### **3. HAS THERE BEEN ANY CONSULTATION?**

- 3.1 A range of stakeholders were consulted on their experience of working with The Corner as referring partner agencies or young people accessing a service. The feedback reflects a very high level of satisfaction with the quality of provision and outcome of referrals.

3.2 Consultation with the following key partners has shaped the revised service specification:

- Young people attending the wellbeing café at Door 43
- Lead cabinet member
- The current service provider
- Service users
- Youth Information Advice and Counselling Service
- Youth Justice Service
- Child Criminal Exploitation team
- Sheffield Inclusion Centre
- MAST
- CAMHS including data from schools, children and parents from the Healthy Minds Framework survey
- Year 10 students Our Voice Matters survey findings on substance use

#### **4. RISK ANALYSIS AND IMPLICATIONS OF THE DECISION**

##### **4.1 Equality of Opportunity Implications**

4.1.1 The report is focussed on the elimination of discrimination and, as such, directly supports the council's Public Sector Equality Duty. People using substances are often discriminated against and experience multiple and complex disadvantages. The process aims to ensure quickly and easily accessible, compassionate, individualised support at the right time for people using substances.

4.1.2 There is overwhelming evidence that drug and alcohol use disorders disproportionately impact on disadvantaged groups in society, including people with disabilities (especially mental health issues), BAME and deprived communities. In addition, relating specifically to alcohol use, people resident in more deprived communities will experience disproportionately high levels of harm from the same alcohol consumption as someone resident in a more affluent community, due to the impacts of other health inequalities they experience.

4.1.3 A thorough Equality Impact Assessment has been undertaken. It considers how the strategy would potentially benefit groups with protected characteristics, including age, gender, disability and sex; and its wider impacts on health, poverty and other issues.

##### **4.2 Financial and Commercial Implications**

4.2.1 The cost of the current contract, which expires 31/03/2020 is £300k.

4.2.2 The contract is funded by the Government Public Health Grant and there is an expectation that the grant will reduce by 2.6% in 2020/21 with similar

reductions in future years. In addition, Public Health Grant has significant pressures that need funding in 2020/21 so the savings in Public Health budgets required are yet to be confirmed but are likely to be more than 2.6% for many budgets.

4.2.3 The service proposal is to maintain the current contract value over an extended period of 5 years +3 years +2 years, with annual reviews and break clauses, to align with the adult services commission as part of an all age approach outlined in the Drug Strategy.

4.2.4 The budget available for the re tender of this contract therefore needs considering as part of the People Portfolio and Public Health Grant business planning process in order to confirm whether a stand still budget is possible before the contract is awarded.

#### 4.3 Legal Implications

4.3.1 Section 6 of the Crime and Disorder Act 1998 places a duty on the local authority to implement a strategy for combatting the misuse of drugs, alcohol and other substances in the local authority's area. When implementing the strategy the local authority must comply with its general duty under S3(1) Local Government Act 1999 to make arrangements to secure continuous improvement in the way its functions are exercised; such improvement includes effective service delivery, value for money and ensuring the project outcome is achieved.

4.3.2 Sheffield City Council's Drugs Strategy includes the recommissioning of services and this will involve procurement and contract award processes. When doing these processes the Council must comply with relevant provisions of the Council's Constitution including its Contracts Standing Orders and Financial Regulations. Where the Public Contract Regulations 2015 applies, the Council must not breach or unlawfully avoid them.

#### 4.4 Other Implications

4.4.1 Since the proposals do not suggest any possibility that the council intends providing any of the currently outsourced services for itself, there are no Employment implications from these proposals.

4.4.2 All other implications have been captured in the processes above.

### **5. ALTERNATIVE OPTIONS CONSIDERED**

5.1 The Young People Substance Misuse Service has been provided by the Council for 15 years and is a key plank of the local Drug Strategy. The current contract cannot be extended and the opportunity is to recommission the service in line with the adult substance misuse service as part of an all age approach.

- 5.2 Another option would be for the Council to deliver the service in house; this has been rejected for a number of reasons. Firstly, the service model involves a significant element of clinical expertise. Secondly, the Council has no experience of delivering the service, and there is a well-developed market of qualified and experienced potential providers. Finally, the Council has no systems in place for clinical supervision of a workforce, licences to hold medication, or provision to manage safe prescribing, and the cost of making the necessary arrangements would be disproportionately high and poor value for money when existing, fit for purpose options exist in the market.

## **6. REASONS FOR RECOMMENDATIONS**

- 6.1 Good quality drug and alcohol support services are essential to help individuals turn their lives around and build stronger families and communities in Sheffield.
- 6.2 The Council has a duty to provide drug and alcohol treatment and support services for the people of Sheffield. The Council is not best placed to deliver these required services, so recommissioning is recommended.
- 6.3 The current legal contractual arrangements in place for both adult and young people services expire on 31 March 2020. This process will ensure continuity of aligned services, with improved access and transitions, to deliver against the Drug Strategy 2018-2022.
- 6.4 The service will be based on local need and trend analysis, and performance data for current service provision will inform where change and improvement is needed for the forthcoming contract period.