

WIRRAL COUNCIL

CABINET

11th September 2014

SUBJECT:	Recovery Orientated Substance Misuse Treatment Service for Wirral Contract Award
WARD/S AFFECTED:	All
REPORT OF:	Director of Public Health, Head of Policy and Performance
RESPONSIBLE PORTFOLIO HOLDER:	Leader of the Council
KEY DECISION?	Yes

1.0 EXECUTIVE SUMMARY

- 1.1 This report is to inform Cabinet of the outcome of the procurement process for a Recovery Orientated Substance Misuse Treatment Service for Wirral and to recommend the awarding of the contact to the preferred bidder, based on their tender scoring highest for both quality of provision and cost to the Council.
- 1.2 On the 10th October 2013, Cabinet authorised officers to commence the re-commissioning process for an integrated drug and alcohol treatment service (minute 78 refers). This process has now concluded and four tenders were received and evaluated according to Council procurement rules.
- 1.3 Appendix 1 (exempt from public report) confirms the detail of the tender evaluation process and as such is exempt from the open part of the public report, due to being commercially sensitive.
- 1.4 The responsibility for the commissioning of drug and alcohol misuse services was transferred from the NHS to the Council under the Health and Social Care Act 2012.

2.0 BACKGROUND AND KEY ISSUES

- 2.1 The shift in national policy from a focus on maintenance to encouraging recovery and reintegration within society has been a major challenge for substance misuse treatment services in Wirral. This national policy shift has required providers to make fundamental changes to their service emphasis, approach and operational delivery.
- 2.2 Although there has been some success in making these changes current performance data shows that the drug system is not achieving national targets. A remodelling of service structure and delivery that a re-commissioning process will provide is the means of achieving the change that the system requires.

- 2.3 The aim of this procurement process was to secure an Integrated Drug and Alcohol Treatment and Recovery system for Wirral.
- 2.4 This contract will bring together services which are currently delivered by a number of providers under one lead provider contract. It includes all elements of a fully integrated substance misuse treatment system including pharmacological, psychosocial and criminal justice interventions with suitable programmes leading to recovery.
- 2.5 The successful provider will be required to deliver a recovery focused service for drug and alcohol users, including all classifications of drugs, a range of levels of alcohol use, those with poly-substance misuse and those using new psychoactive substances (legal highs) as well as those dependent on prescription and over the counter medicines. The integrated service will be provided to substance misusers with a range of complexities such as poly-drug use, dual dependency, mental health problems, pregnancy and involvement with criminal activity.
- 2.6 The service is predominately provided to those over the age of eighteen. Service users will be resident within or registered with a General Practitioner within the Borough of Wirral.
- 2.7 The successful provider must ensure equality of access for all drug and alcohol users and must be able to deliver an effective recovery focused drug and alcohol misuse treatment system to enable service users to access appropriate and timely treatment resulting in successful treatment completion. They will be required to provide evidence based treatment services to address the harm caused by drugs and alcohol on misusers and the impact this has on the local community, along with an effective aftercare and support system.
- 2.8 The key essential elements of this service are:
- Assessment, care planning, co-ordination, pathways and review
 - Harm reduction, specialist needle exchange and prevention of drug related deaths, injury and overdose
 - Psychosocial interventions
 - Pharmacological interventions and delivery of a shared care system
 - Interventions to reduce crime, re-offending and anti-social behaviour
 - Support to achieve freedom from dependence on drugs and alcohol
 - Access to residential detoxification, treatment and aftercare
 - Focus on children and families, carers and safeguarding
 - Recovery and aftercare
 - Access to mutual aid and peer support
 - Effective user and carer involvement
 - Support to access employment, training, education and volunteering.
 - Support to access suitable accommodation
 - Interventions aimed at improving mental and physical health and wellbeing.
- 2.9 The contract is initially for three years with the option to extend for a further two one year extensions. The proposed start date of the contract is the 1st February 2015.

Procurement

- 2.10 An OJEU notice was published on the 24th January 2014, informing potential bidders that the procurement of the contract was underway, using the restricted procedure and inviting expressions of interest thorough the completion of a comprehensive pre-qualification questionnaire (PQQ) via the CHEST.
- 2.11 By the closing date of 31st March 2014, six completed PQQs had been submitted and were evaluated by officers from the Public Health and Corporate Procurement teams and a General Practitioner representative from Wirral Clinical Commissioning Group. It was agreed that all six expressions of interest be invited to tender, this invitation was issued on the 14th April 2014.
- 2.12 Of the six providers who expressed an interest, only four submitted tenders by the closing date of the 6th June 2014.

The tenders were evaluated against the following weightings:

- Quality 60%
- Price 40%

- 2.13 The evaluation consisted of two stages:
- Stage 1 – Invitation to tender submission, represented 95% of the overall quality score and 100% of the price score
 - Stage 2- Presentation, represented 5% of the overall quality score
- 2.14 The results of the evaluation are reported in Appendix 1 which is exempt from publication due to the nature of its contents being commercially sensitive.
- 2.15 In accordance with the Public Contracts Regulations 2006, Cabinet should note that there is a statutory ten day “standstill period” to enable unsuccessful tenderers to obtain feedback on the Council’s contract award decision and lodge a legal challenge if dissatisfied with the legality of the decision. Only after this period can the contract be formally awarded.

3.0 RELEVANT RISKS

- 3.1 There is an ageing population of opiate users living on the Wirral; failure to continue to support these individuals either with an effective harm reduction offer or with a move from a maintenance regime to a recovery system will not optimise the outcomes both for the individuals and local communities. The Council is required to maximise the value for money it achieves for all services.
- 3.2 Failure to support the above in a properly structured and realistic manner, taking into account the behavioural characteristics of long term dependence, could result in an increase in some of the negative impacts of problematic opiate use on the wider community e.g. users returning to acquisitive crime, unsafe injecting leading to an increase in the spread of HIV and Hepatitis, an increase in drug related deaths.

- 3.3 There are risks currently identified relating to the mobilisation of this new integrated service. Following notice of intention to award, these will be mitigated by close monitoring of the progress of service implementation by Public Health Commissioners.

4.0 OTHER OPTIONS CONSIDERED

- 4.1 The option to continue with current provision was considered; however, it was concluded that this would not support innovation and the potential to deliver a more cost effective service.

5.0 CONSULTATION

- 5.1 Consultation and engagement with key stakeholders was an important element in the development of the model for drug and alcohol treatment services that has been re-procured.
- 5.2 Following Cabinet approval a 12 week consultation process took place from 6th November 2013 to 29th January 2014 and included online questionnaires and workshops.
- 5.3 Three surveys were devised, one for people with direct experience of current drug and alcohol services, one for people with no direct experience of current services and a third for GPs. The general public questionnaires were available on the Council's website and promoted through the use of social media, Wirral CVS and service providers. The GP questionnaire was circulated via Wirral Clinical Commissioning Group.
- 5.4 We received 948 responses; 720 responses from people with no direct experience of current services; 218 responses from people with direct experience of current services and ten responses from local GPs and key themes were identified and incorporated in the service specification.

6.0 OUTSTANDING PREVIOUSLY APPROVED ACTIONS

- 6.1 There are no outstanding previously approved actions.

7.0 IMPLICATIONS FOR VOLUNTARY, COMMUNITY AND FAITH GROUPS

- 7.1 Organisations from the Voluntary, Community and Faith are currently involved with the delivery of elements of provision, some of these groups will continue to be included in the new provision.

8.0 RESOURCE IMPLICATIONS: FINANCIAL; IT; STAFFING; AND ASSETS

- 8.1 There is allocated funding for the services re-procured from the Public Health grant. The tender exercise has resulted in the development of a more integrated and cost effective model.

T.U.P.E. issues will need to be addressed between existing and new providers.

9.0 LEGAL IMPLICATIONS

- 9.1 The Invitation to Tender and process to establish a Contract Agreement is a competitive procurement procedure conducted in accordance with EU Procurement Directives and as implemented in English Law in the Public

Contracts Regulations 2006 (SI2006 No.5) and such other UK regulations implementing its provisions as may be made from time to time.

The transfer of employees between the current providers and the incoming provider is governed by the European Acquired Rights Directive 77/187EEC (as amended by 2001/23EC) and/or Transfer of Undertakings (Protection of Employment) Regulations 2006 (TUPE).

10.0 EQUALITIES IMPLICATIONS

10.1 Has the potential impact of your proposal(s) been reviewed with regard to equality?

- (a) Yes and can be located at <http://www.wirral.gov.uk/my-services/community-and-living/equality-diversity-cohesion/equality-impact-assessments/eias-2010/public-health>

11.0 CARBON REDUCTION AND ENVIRONMENTAL IMPLICATIONS

11.1 There are no specific carbon reduction and environmental implications arising from this report.

12.0 PLANNING AND COMMUNITY SAFETY IMPLICATIONS

12.1 There are no specific planning implications arising from this report.

12.2 Commissioned drug and alcohol services work closely with all elements of Criminal Justice agencies involved in the delivery of the integrated offender management strategy. Partners from the Criminal Justice System were consulted during the re-commissioning process. The new service will work closely with partners to ensure to that offenders can readily access drug and alcohol treatment from all points of their contact with the criminal justice system. This will maximise impact on all elements of drug and alcohol related offending such as acquisitive crime, violence and anti-social behaviour.

13.0 RECOMMENDATION/S

13.1 Cabinet is requested to:

1. Note the outcomes of the procurement exercise described in this report
2. Approve the award of the contract for the Recovery Orientated Substance Misuse Service for 2015-18 t with the option to extend for a further two one year extensions to the preferred bidder as identified in appendix 1, subject to statutory standstill procedures.

14.0 REASON/S FOR RECOMMENDATION/S

14.1 Re-commissioning will release cost savings from a system that has been in receipt of funding uplifts over a number of years. It will offer an opportunity to refocus the service and improve performance. Further integration of the drug and alcohol services will achieve cost efficiency savings in terms of co-location and a multi skilled workforce.

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APPENDICES

Appendix 1 (Exempt)

BACKGROUND PAPERS/REFERENCE MATERIAL

BRIEFING NOTES HISTORY

Briefing Note	Date

SUBJECT HISTORY (last 3 years)

Council Meeting	Date
Cabinet - Proposal to re-commission treatment services for adults who misuse drugs and alcohol	10 th October 2013