

Policy Committee

25 September 2023



Reading
Borough Council
Working better with you

Title	Rough Sleeping Drug and Alcohol Treatment Grant (RSDATG) and Multiple Disadvantage Outreach Team (MDOT) Contract
Purpose of the report	To make a decision
Report status	Public report
Report author	Sally Andersen
Lead Councillor	Cllr Ruth McEwan
Corporate priority	Thriving Communities
Recommendations	<ol style="list-style-type: none">1. That Policy Committee approve to a procurement for the Rough Sleeper Drug and Alcohol Treatment Grant (24/25) for one year + 18months (an expected total value of £1,866,460), on the condition that Department Levelling Up, Housing and Communities extend the grant beyond 2024/25.2. That the approval for delegated authority of award of the new contract from 1 April 2024 and any extension is given to the Executive Director of Communities & Adult Social Care in consultation with the Lead Councillor for Education and Public Health.

1. Executive Summary

- 1.1. The Ministry of Housing, Communities and Local Government (MHCLG) and Department of Health and Social Care (DHSC), announced at the Budget in March 2020 that they had secured £262m to be available during 2020-2024 for drug and alcohol treatment and related provision. This was specifically to meet the needs of people experiencing rough sleeping who have drug and alcohol dependence needs. A further funding allocation for 2024/25 was announced in June 2023.
- 1.2. The funding is to boost structured drug and alcohol treatment services, to account for additional costs from increased access and engagement from this population and consideration should be given to how existing services can find ways to adapt, improve or extend their support to this population.
- 1.3. In January 2022 Reading awarded a contract to Change Grow Live to deliver the Multiple Disadvantage Outreach Team service. The contract was for 15 months plus 1 year in line with the grant conditions. The contract extension ends March 2024.
- 1.4. The continuation of the Rough Sleeper Drug and Alcohol Treatment grant has been confirmed to support the continuation of the programme during June 2023 for 2024/25.
- 1.5. This report recommends that we therefore seek to procure and award a contract for the confirmed one-year period and to include an option to extend the contract for a further 18-month period from April 2025. This would be on the understanding and strict condition that RBC receives early confirmation from the Department for Levelling Up, Housing and Communities that they will agree to extend the grant beyond 31 March 2025. The initial contract term will be 1 April 2024 – 31 March 2025, and if applied, the

extension will be for the period 1 April 2025 to 30 Sept 2026 (an expected total value of £1,866,460). It is entirely dependent upon whether or not further funding is confirmed at least three months before the initial term expires and that the continuation is mutually agreed. As in previous years it is likely that RBC will receive confirmation from Government of any further grant funding awards during January 2024 and 2025.

- 1.6. The existing core substance misuse treatment and recovery services contract which provides drug and alcohol treatment funded activity for the broader population has a contract through to 30 September 2026. It is recommended that the two contracts run in parallel which will require the 18-month extension period referred to above.

2. Policy Context

- 2.1. Government had announced up to £186.5 million for 2021-2024 for the Rough Sleeping Drug and Alcohol Treatment Grant. This commitment will build on the previous 2 years of funding for this programme, to break the cycle of addiction and rough sleeping. The scheme provides funding for substance misuse treatment services for people sleeping rough or at risk of sleeping rough. Continued funding has been confirmed beyond 2024 until March 2025.
- 2.2. The government has a manifesto commitment to end rough sleeping in this parliament. This means rough sleeping is prevented wherever possible and, where it cannot be prevented, it is a rare, brief, and non-recurring experience.
- 2.3. The Rough Sleeper Drug and Alcohol Treatment grant offers an opportunity to increase local authority support for the rough sleeping and drug and alcohol agenda. The 2021-2024 monies have built an outreach service in Reading that is more about re-engagement of people, engages a broad range of partners and stakeholders, impacts on increasing health inequalities for these individuals and better understand the impact of drug and alcohol treatment for individuals with complex needs.
- 2.4. The Rough Sleeper Drug and Alcohol Treatment Grant fund compliment's key themes to two of Reading's Strategies:
- 2.5. Berkshire West Health & Wellbeing Strategy 2021-2030 -Reduce the differences in health between different groups of people, Support individuals at high risk of bad health outcomes to live healthy lives, Promote good mental health and wellbeing for all adults; The grant ensures those experiencing rough sleeping understand the health risks associated with drugs and alcohol, the consequences using can have on education, employment, relationships, housing and the impact on the environment where the individual is misusing can have.
- 2.6. Rough Sleeping Strategy 2019-2024 – Early intervention and prevention, recovery and integration, rapid intervention, united support and enforcement and provision of information; to prevent those who are vulnerable to sleeping rough from moving towards entrenched and harmful behaviours and lifestyles by intervening as early as possible.

3. The Proposal

- 3.1. In June 2020, Reading was invited to bid for funding through the Rough Sleeping Drug and Alcohol Treatment Grant for services to be delivered in 2021/22, 2022/23 and 2023/24.
- 3.2. Reading's proposal to the Rough Sleeping Grant was approved by Public Health England in December 2020, and the receipt and spend of this allocation to 31 March 2024 was approved by Policy Committee in July 2021.
- 3.3. Reading awarded the contract "Multiple Disadvantage Outreach Team" (MDOT) to CGL Reading in Jan 2022 for a period of 15 months plus one year. This contract provides an assertive response, improved support, and recovery outcomes to those experiencing

rough sleeping who have drug and alcohol dependence and mental/physical health support needs.

- 3.4. MDOT is a team of 12 specialist workers who are fully mobile. MDOT have a current caseload of approximately 90 individuals, working flexibly to address drug and alcohol needs. The team assertively engage, motivate and co-ordinate access to specialist immediate support that addresses co-occurring mental ill-health and substance dependence in a trauma/psychologically informed way.
- 3.5. The total value of the Change Grow Live (CGL) contract in the 2022/23 outturn was £2,000,770. In 2023/24 it is predicted to be £2,075,770. The MDOT Contract is a separate contract with CGL and the 23/24 annual spend is £746,584.
- 3.6. In December 2022, Reading was invited to undertake a review of the current MDOT staffing model and associated project costs and submitted a revised proposal to DLUHC for a period of 16 months from 1 December 2022 to 31 March 2024 which was approved.
- 3.7. Reading has received notification of its annual funding allocation for Rough Sleeper Drug and Alcohol Treatment Grant as follows:

Reading Annual Budget	22/23	23/24	Indicative Rough Sleeper Drug and Alcohol Treatment Grant allocations for 2024-2524/25
	737,665	746,584	746,584

- 3.8. The indicative allocation for 24/25 is the same annual allocation as agreed in 23/24, subject to adjustment for any locally held underspend that will be identified at the end of year financial reconciliation in Q1 of 2023-24. This same process is taking place now for 2022-23.
- 3.9. The grant and the contract delivery are reviewed quarterly by the Senior Commissioner Drugs and Alcohol and DLUHC.

Options Proposed

- 3.10. Option 1 (Not Recommended): Option to not take receipt of the extension of the Rough Sleeper Drug and Alcohol Treatment Grant funding awarded by Department Levelling Up, Housing and Communities. This option is not recommended on the basis that to not take receipt of the funding will lose the opportunity to assist more people to recover from drug and alcohol use and to move towards settled accommodation.
- 3.11. Option 2 (Recommended): To procure activity for delivery through a competitive tender. The contract must stipulate that extension of contract is on the condition that the Department Levelling Up, Housing and Communities funding is extended and continues beyond 2025.
- 3.12. The re-procurement will ensure continuity of service and protect vulnerable residents. The procurement process should commence in Autumn 2023 to maximise outcomes to be achieved from the service and to allow for TUPE of staff if required.
- 3.13. It is proposed that a procurement process be undertaken in line with PCR2015 Regs 22, 27 and 76; CPRs 9 and 10 to allow for a best-value solution to be procured for any future funds. The Grant commitments are often late announcements by DLUHC and an agreement for any extension will need to be secured with the winning provider as soon as DLUHC confirm additional funds. The grant monies must be spent within a limited period agreed annually in April.

4. Contribution to Strategic Aims

- 4.1. The rough sleeper grant will work towards ensuring we are working towards meeting the Corporate Plan priorities:

Healthy environment

- 4.2. The rough sleeper grant contributes to ensuring the Council fulfils its aim of ensuring that the needs of the most vulnerable are met and that people are supported to be healthy and active.
- 4.3. There is evidence based, high-quality treatment and other harm-reduction interventions, supply reduction, and education and prevention initiatives that are effective ways of tackling illicit drug and other harmful substance use. This grant will enable us to work to tackle some of the multicomplex issues faced by those experiencing rough sleeping, expanding and developing trauma informed approaches.

Thriving Communities

- 4.4. The Rough Sleeper Drug and Alcohol Treatment Grant focuses on the key theme of “Thriving Communities” which includes a commitment to tackling inequality in our society, investing in voluntary and community organisations (VCS), prioritising the needs of the most vulnerable and marginalised groups, and tackling the effects of the pandemic to include health and mental health issues. Our Housing Strategy 2020-2025 and Housing initiatives alongside our Adults Transformation Programme and VCS initiatives highlight our commitment to our residents with multiple disadvantages, which this service helps to deliver.
- 4.5. Those experiencing rough sleeping are one of the most vulnerable groups in society. The additional grant funding will help to meet the health and housing needs of rough sleepers. It will support our vulnerable rough sleeping population to become well enabling them to be more economically active, and involved with learning, employment and training.

Inclusive economy

- 4.6. With an increased focus on inclusion, we will prioritise the needs of the most vulnerable and excluded in our communities ensuring those with long term health conditions or disabilities are supported to live their best lives.

- 4.7. The grant contributes to the TEAM Reading values:

Together The solutions to improving the health of those experiencing rough sleeping does not sit with one team alone – it involves the NHS, Local Authorities, Police along with the voluntary and charity sectors all working together. A ‘population health’ approach is required to improve the health and wellbeing of those who experience rough sleeping.

Efficiency Each £1 spent on treatment will save £4 from reduced demands on health, prison, law enforcement and emergency services.

Ambitious We strive to enable everyone to be able to access drug and alcohol treatment at a time that is right for them. We are working to the government commitment to ending rough sleeping by 2027.

Make a Difference The grant makes a difference to people lives by being proactive, accessible and by bringing hope and real change to the many individuals, families and communities whose lives are destroyed by drug/ alcohol addiction.

- 4.8. Contributions are also made to the following:

Sustainability the funding aims to build resilience and capacity in local drug and alcohol treatment systems to continue to meet the needs of this population in future years (resilient and sustainable models of care).

Community Safety Tackling rough sleeping, drugs and alcohol also promotes Community Safety by reducing anti-social behaviour; by encouraging harm reduction messages and reducing health risks to the community. Making communities safer by ensuring early identification and access to support and treatment for those misusing substances.

Health the funding is designed to support individuals in accessing, engaging with and sustaining engagement with drug and alcohol treatment and other relevant health services. This is particularly relevant for those who have multiple and complex needs, including co-occurring mental ill health and substance dependence, and experiences of trauma.

5. Environmental and Climate Implications

- 5.1. There are no environmental or climate implications arising from the decision. It may be anticipated that the medium-term financial security of the substance misuse treatment and recovery service will best support those who are amongst the most vulnerable to the impacts of climate change.

6. Community Engagement

- 6.1. The pre-decision consultation on the remodelling of the service in December 2022 has involved engaging with the following stakeholders:
- Public Health and Wellbeing Team
 - Housing Team colleagues
 - Healthcare partners
 - Provider of adult drug and alcohol treatment services
 - Service Users
 - Stakeholders and partners in Reading
- 6.2. As part of the Re-profiling process with OHID, Public Health and CGL Reading have consulted with services users and stakeholders and now undertake joint outreach and assessments, e.g., with housing providers and other health organisations in Reading, developing better partnership working, joint working protocols, co-location in the Council and with Partners, better transitioning into primary and secondary healthcare settings, and increased mental health provision.

7. Equality Implications

- 7.1. An Equality Impact Assessment (EIA) is not relevant to the decision. We do not have evidence or reason to believe that some groups may be affected differently than others. There is no public concern about potentially discriminatory practices. Rough sleepers are some of the most marginalised and excluded individuals in society and the aim of the service is to improve health and treatment services for these people and enable them to achieve sustained recovery and play an active role in their community.

8. Other Relevant Considerations

8.1. There are none.

9. Legal Implications

9.1. There are none

10. Financial Implications

10.1 The financial implications arising from the proposals set out in this report are set out below:

Below are the figures for the Grant - the Grant is the annual Contract Value

Revenue Implications

	2022/23 £000	2023/24 £000	2024/25 £000
Employee costs and other running costs CONTRACT VALUE	£737,665	£746,584	£746,584
Expenditure			
Income from Grant funding GRANT VALUE	£737,665	£746,584	£746,584
Total Income	£737,665	£746,584	£746,584
Net Cost (+)/saving (-)			

Capital Implications

Capital Programme reference from budget book: page line	2022/23 £000	2023/24 £000	2024/25 £000
Proposed Capital Expenditure	N/A	N/A	N/A
Funded by Grant (specify) Section 106 (specify) Other services Capital Receipts/Borrowing			
Total Funding	N/A	N/A	N/A

Value for Money (VFM)

10.2 Value for Money – there is an evidence-base for the effectiveness of drug and alcohol treatment. Evidence shows that treatment provides value for money, improves public

health and reduces crime. Treatment enables people to recover from dependence and addiction, improves their physical and mental health and reduces the harm caused to themselves and people around them, including reducing crime. Evidence-based treatment is provided in accordance with the UK Clinical Guidelines, 'Drug misuse and dependence: UK guidelines on clinical management'

- 10.3 A full procurement process will ensure best value for money is sought for future contact awards.

Risk Assessment.

- 10.4 If DLUHC do not invest beyond March 2025, this service will be withdrawn, and service users will be encouraged into mainstream services.
- 10.5 If Reading do not spend the annual grant allocations, this will have to be returned to DLUHC.

11 Timetable for Implementation

- 11.1 Not applicable.

12 Background Papers

- 12.1 There are none.

Appendices

1. Equality Impact Assessment Statement