

Public Health
222 Upper Street, N1 1XR

Report of: Executive Member for Health and Social Care

Meeting of: Executive

Date: 20th July 2023

Ward(s): ALL

Subject: Allocation of the Public Health Supplementary Substance Misuse Treatment and Recovery Grant 23-24

1. Synopsis

- 1.1. Public Health officers intend to seek Executive approval to allocate £1,014,000 of the council's Supplementary Substance Misuse Treatment and Recovery Grant (SSMTR) to Camden and Islington NHS Trust (provider of the council's integrated substance misuse service) via a Grant Agreement.

2. Recommendation

- 2.1. To agree the allocation of £1,014,000 of the council's Supplementary Substance Misuse Treatment and Recovery Grant (SSMTR) to Camden and Islington NHS Trust (the "Trust") via a Grant Agreement

3. Background

- 3.1. In December 2021, the Government published a 10- year, national drug strategy [From Harm to Hope](#). The strategy outlines the Government's ambition to develop a world class drug and alcohol treatment system and also includes a number of desired outcomes.

- 3.2. To support local authorities with the delivery of the outcomes outlined in the strategy, every local authority in England has been awarded the Supplementary Substance Misuse Treatment and Recovery Grant (SSMTRG). The grant is awarded by and managed by the Department of Health and Social Care/Office of Health Improvement and Disparities.
- 3.3. The council's SSMTR grant income this financial year is £1,399,416 (including underspend of £44,895 from 22/23). Officers were notified of the grant allocation in late February 2023. Officers subsequently liaised with key delivery partners and grant leads at the Office of Health Improvement and Disparities to agree how the grant could be spent to support the council in achieving the outcomes outlined in the national Drug Strategy.
- 3.4. During the grant spending plan development phase, OHID notified the council that it had been identified as "priority partnership". This essentially means that the council has been nominated as an area where the greatest gains in achieving particular outcomes of the strategy have been identified. These outcomes are: *"increasing the numbers of people accessing substance misuse treatment, and improving the number of people engaging with substance misuse treatment on release from prison"*. Officers were encouraged by OHID Leads to develop interventions to fund from the SSMTRG which would maximise the achievement of those two outcomes.
- 3.5. The total amount officers wish to allocate the Trust is £1,104,000. The remainder of the council's SSMTRG monies has been allocated to Young People's Substance Misuse (£100K), and increasing capacity within the Public Health team to manage the grant (£80K).
- 3.6. The increase in the grant also supports investment in a new, innovative programme called Support When It Matters (SWIM) (£150k). People from African, Caribbean and Dual Heritage backgrounds are over-represented in prison and largely underrepresented in drug and alcohol services. SWIM will proactively reach and support black males who are in/leaving the prison system who are non-opiate users and may not have accessed prison substance misuse services. The programme will support them to access community substance misuse services using culturally sensitive approaches. The end-to-end programme, based on SWIM's successful Prepare, Adjust, Contribute, Thrive (PACT) model for African, Caribbean, and Dual Heritage (ACDH) people in the criminal justice system and/or with mental health issues and substance misuse, will benefit at least 60-70 black men leaving the prison system and comprise:
- In-reach prison surgeries to engage the cohort before their release
 - Meet at the Gate on release by a SWIM support worker

- One-to-one psychosocial interventions as required for each client to stabilise their accommodation, finances, benefits, health and mental health
- Weekly group sessions to explore the personal, societal and cultural influences of substance misuse along with strategies for cessation

3.7. A table summarising the 2023/24 spending plan is included as the Appendix.

3.8. Allocating the funding to the Trust is the preferred option. The council considered a number of options including undertaking a procurement process, however as the funding is only guaranteed for one financial year, the preferred option is to transfer the grant funding to the Trust. There are a number of reasons for this:

- a. The Trust are already in a position to optimise the achievement of the desired outcomes due to their role with the council providing substance misuse services.
- b. Timeliness of allocating grant monies and progressing agreed objectives and delivery plan(s) – The funding is available for a very limited period and OHID have been very clear that any unspent grant in 23/24 can be deducted from future grant allocations. The grant spending period began on 1 April 2023. Therefore, it is important that the council can demonstrate that the grant is being spent in full within the financial year. Any further delay to the allocation of the grant will increase the risk of the grant not being fully spent. As detailed above the Trust are in a prime position to begin achieving the required outcomes.
- c. The Trust are a trusted provider of various health services within Islington including health-related services commissioned by the council. They already have robust partnership arrangements with the key delivery partners to implement the SSMTR funded interventions successfully and effectively.

3.9. The council is confident that the Trust will be able to deliver the outcomes by adding additional posts and pathway improvements outlined in the council's delivery plans.

3.10. The market has not been tested in respect of this grant and there may be other providers available, however the council is confident that the Trust can utilise the grant efficiently and meet the required outcomes by the end of the financial year 2023/24. Pertinent to consideration of testing the market is the time that this would take, and the likelihood that this could take beyond the end of the financial year meaning the council would fail to achieve the required outcomes.

3.11. The agreed grant spending plan includes a large number of additional staff to safely and effectively manage the required increase in people accessing treatment and therefore complement existing services. Some of these additional roles will

be co-located with key delivery partners including the local probation service, in-reach to prisons and police custody suites, co-location with mental health core community teams and increasing in-reach to supported accommodation sites.

- 3.12. The broad outcomes required under the proposed Grant Agreement differ from the existing detailed services agreement between the council and the Trust. Therefore, the council considers it is appropriate to allocate the funding as a grant to the Trust.
- 3.13. A number of options have been considered by officers, including a procurement process, a grant agreement (including advertising the grant) and partnership arrangements. As a grant has been awarded to the council by Central Government it is the preferred option to pass funding on to the Trust in the form of a grant on the clear understanding that the council is not procuring substance misuse services from the Trust.

4. Implications

4.1. Financial Implications

- 4.1.1. This proposal seeks to transfer £1,014,000 of the council's Supplementary Substance Misuse Treatment and Recovery Grant (SSMTR) to the Trust via a grant agreement.
- 4.1.2. The SSMTR grant is a revenue grant provided from the Office for Health Improvement and Disparities. The SSMTR is a three year grant but allocated on an annual basis. Financial Year 23/24 is the second year of the grant, and the council has been awarded £1,399,416 (including carried forward £44,895 from FY22/23). The remainder of the SSMTR has been fully committed elsewhere. Additional funding will not be provided to any recipients of the SSMTR grant, recipients of SSMTR grant will need to meet the cost of any overspend from their own budgets. The grant will compliment and act as additional funding to existing substance misuse spend, it will not be used to substitute for existing expenditure or for the provision of additional services to be provided on behalf of the council. .
- 4.1.3. The Trust will claim funding quarterly up to a total of £1,014,000. The funding needs to be closely monitored to ensure that the council is compliant with SSMTR conditions, namely the reporting of any underspends for reprofiling.

4.2. **Legal Implications**

4.2.1. The decision recommended in paragraph 2.1 of this Report is a Key Decision of the council's Executive to be made in accordance with the council's Constitution, Part 2, Article 13.03.

4.2.2. The council has a duty to deliver specified public health functions, and section 111 of the Local Government Act 1972 can be used to allow the council to discharge its public health substance misuse functions through the allocation of grant funding to the Trust.

4.2.3. There is a risk that the Grant Agreement between the council and the Trust could be considered a services agreement which should have been competitively procured by the council in accordance with the Public Contract Regulations 2015 or which should have been dealt with under those Regulations by modifying the current contract with the Trust. However, the risk of a successful complaint or challenge from the market can be significantly reduced by not imposing obligations on the Trust in the Grant Agreement which amount to service-type obligations.

The Trust does not provide services on the market as it does not charge users for its services. Therefore, the grant to the Trust is not a subsidy for the purposes of the Subsidy Control Act 2022 and the provisions of that Act do not apply.

4.2.4. Legal Officers will assist in the drafting of the necessary Grant Agreement. The grant terms that the council have signed up to under the Memorandum of Understanding between the Secretary of State for Health and Social Care and the council can be used to create a "back-to-back" agreement whereby the obligations on the council in respect of the use of the grant and the liabilities arising from the same are essentially copied over to the Trust.

4.3. **Environmental Implications and contribution to achieving a net zero carbon Islington by 2030**

4.3.1. Any implications have been considered and are outside of this report's remit but added into the final report for the Executive.

4.3.2. An EIA has been completed and reviewed and approved by Energy Services.

4.4. **Equalities Impact Assessment**

4.4.1. The council must, in the exercise of its functions, have due regard to the need to eliminate discrimination, harassment and victimisation, and to advance equality of opportunity, and foster good relations, between those who share a relevant protected characteristic and those who do not share it (section 149 Equality Act

2010). The council has a duty to have due regard to the need to remove or minimise disadvantages, take steps to meet needs, in particular steps to take account of disabled persons' disabilities, and encourage people to participate in public life. The council must have due regard to the need to tackle prejudice and promote understanding.

4.4.2. An Equalities Impact Assessment screening document has been completed and reviewed. The decision was that a full EQIA is not required.

5. Conclusion and reasons for recommendations

5.1. It is recommended that £1,014,000 of the council's Supplementary Substance Misuse Treatment and Recovery Grant (SSMTRG) is issued to the Trust via a Grant Agreement.

5.2. Issuing the funding to the Trust in the form of a grant will ensure timely and effective delivery of the required outcomes.

5.3. **Appendices:**

- Equalities Impact Assessment – attached.

Background papers:

- None

Final report clearance:

Authorised by:

Cllr Nurullah Turan, Executive Member for Health and Social Care

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Appendix: Summary of SSMTR grant spending plan for 2023/24

Mechanism	Organisation	Description	Value	Comments
Grant Agreement	SWIM Enterprises	Prison Project	£150,000	Grant issued
Grant Agreement	C&I NHS Trust	Various interventions and new staff roles	£1,014,000	Waiting approval for grant
Salary	1.0 WTE PH Strategist 0.5 WTE Contract Support		£80,000	PH Strategist will start on 7 th Aug The CS Officer will be funded 50/50 by SSMTR Grant and RSDAT Grant
Grant Agreement	Community Pharmacies	Nasal Naloxone Project	£20,000	Officers to identify pharmacies to deliver the programme
Substitute	YPSM	2 x additional YPSM workers	£100,000	Substitute requested
Invoice	LBC	Contribution to Criminal Justice Peer Support Project	£35,000	LBC will raise PO and invoice request