

# KENT COUNTY COUNCIL – RECORD OF OFFICER DECISION

**DECISION TAKEN BY:**

Dr Anjan Ghosh, Director of Public Health

**DECISION NO:**

OD/25/00002

**For publication**

**Subject matter:** Kent Adult Drug and Alcohol Treatment Contracts (West & East) – Recommission

**Cabinet Member decision to which this action relates:**

[Record of Decision](#) 24/00055 - Kent Adult Drug and Alcohol Treatment Contracts – re-commissioning

**Decision:**

As Director of Public Health, I agree to:

- I. APPROVE the procurement, via the Provider Selection Regime (PSR) Direct Award C, of Forward Trust & Change, Grow Live for the East and West Kent Community Drug and Alcohol Services respectively, effective from 1 February 2025 to 31 January 2029 (four years with two additional two-year extension options),
- II. CONFIRM that future Office for Health Improvement and Disparities (OHID) grant funding (if received) be deployed against this area of work in accordance with key decision [22/00041](#)

**Reason(s) for decision:**

Kent County Council has statutory responsibility as a condition of its Public Health Grant to provide specialist substance misuse services aimed at reducing the harm caused by drugs and alcohol and to improve the health and wellbeing of the people of Kent.

The two contracts under the Adult Kent Drug and Alcohol Services are due to expire on 31 January 2025 and a key decision was required to plan for beyond this date.

The [Record of Decision](#) 24/00055 delegated authority to the Director of Public Health to:

- I. take relevant actions, including but not limited to, entering into and finalising the terms of relevant contracts or other legal agreements, as necessary, to implement the above decision,
- II. in consultation with the Cabinet Member for Adult Social Care and Public Health, the exercise of any extensions permitted in accordance with the extension clauses within the contract.

This Officer decision confirms direct awarding the existing adult drug and alcohol contracts to Change, Grow Live in West Kent and Forward Trust in East Kent for the continuation of their adult drug and alcohol services.

Awarding the contracts under PSR Direct Award C has been deemed the appropriate procurement route as the new contracts are not materially different in character to the existing contracts, and the authority is assured that the existing providers are satisfying the existing contracts and will likely

satisfy the proposed contracts to a sufficient standard.

In reaching this decision, an evaluation of the providers performance to date was undertaken with reference to the following key criteria (as required under regulation 5 of the PSR):

- a. Quality & Innovation,
- b. Value
- c. Integration, Collaboration & Service Sustainability,
- d. Improving Access, Reducing Health Inequalities and Facilitating Choice, and
- e. Social Value

The results of this evaluation were then reviewed by an internal panel, which concluded the provider had evidenced each of these items to a sufficient degree.

The following call-in period did not receive any external representations to challenge the decision being approved.

### **Financial Implications:**

The funding for these contracts would be funded entirely from the Public Health Grant.

The estimated financial commitment for an eight year contract for the East Kent Drug and Alcohol Service is £43,461,175.80. This equates to an average of approximately £5.5m annually.

The estimated financial commitment for an eight year contract for the West Kent Drug and Alcohol Service is £30,291,915.85. This equates to an average of approximately £3.8m annually.

Additional OHID grant funding, linked to the 10-year national drug and alcohol strategy 'From Harm to Hope', is only currently confirmed until 31 March 2025. Should this funding be extended beyond that point, it will be treated as a contract variation and will be in addition to the above estimated values and will require the providers to deliver additional activity.

The additional grant-funded activity would include a continuation of activity currently funded by the existing OHID grants however innovation would also be considered, should funding allow.

A key decision ([22/00041](#)) has already been taken to accept and deploy the additional money received, therefore a further decision would not be required for deployment of further funding.

### **Legal implications:**

Under the Health and Social Care Act 2012, Directors of Public Health (DPH) in upper tier (UTLA) and unitary (ULA) local authorities have a specific duty to protect and enhance the population's health.

KCC commissions these services as part of its statutory responsibilities and as a condition of its Public Health Grant. Kent Drug and Alcohol Services aim to reduce the harm caused by drugs and alcohol and improve the health and wellbeing of the people of Kent. The local authority's Public Health Grant requires the Authority to "have regard to the need to improve the take up of, and outcomes from, its drug and alcohol misuse treatment services."

The recommissioning of these services took place under the Provider Selection Regime (PSR) introduced under the Health and Care Act 2022. Appropriate legal advice was sought in collaboration with the Governance, Law & Democracy team and was utilised to ensure compliance with relevant legislation; the Provider Selection Regime is still in its infancy and so commissioners

worked closely with this team as well as the Commercial and Procurement Team.

### **Equality Implications:**

Equalities Impact Assessments have been completed for each of the services in scope. Current evidence suggests that there is no negative impact and this recommendation is an appropriate measure to advance equality and create stability for vulnerable people. The EQIAs are attached as Appendices A and B.

Providers are required to conduct annual EQIAs as per contractual obligations

### **Data Protection Implications:**

General Data Protection Regulations are part of current service documentation for the contract and there is a Schedule of Processing, Personal Data and Data Subjects confirming who is data controller/ processor. There is also an existing Data Protection Impact Assessment (DPIA) relating to the data that is shared between Kent County Council, the provider and the Office for Health Improvement and Disparities (previously named Public Health England) and the services.

DPIAs will be updated following contract award to ensure they continue to have the most up-to date information included and reflect any changes to data processing as a result of the specification enhancements.

### **Comments received from any Members or Officers consulted:**

The proposed decision was discussed at the Health Reform and Public Health Cabinet Committee on 2 July 2024 and the recommendations were endorsed.

The Cabinet Member for Adult Social Care and Public Health commented: “I endorse the decision to award the Kent Adult Drug and Alcohol Treatment Contracts to the existing providers, in order to continue the good work they are doing in reducing harm for people using drugs and alcohol in Kent”.

### **Any alternatives considered and rejected:**

Keep current service the same - no change/ do nothing - The drug landscape has changed since the current service was tendered; it is important that services are fit for purpose and meet people’s presenting needs and therefore this was a non-viable option.

Discontinue/ decommission the current service - Decommissioning the service was concluded as a non-viable option that would place KCC in breach of the Public Health Grant conditions.

Split the service in two – one focusing on detox and treatment and the other focusing on recovery - it was deemed that this would add confusion to an already complex system within Kent.

Bring pharmacy contracting responsibilities in-house - established relationships are already in place with providers, bringing pharmacy provision in-house risks limiting the pool of available pharmacies, which in turn may create a barrier for people in terms of access.

Stop using fixed premises and move to a co-location model – it is important that drug and alcohol services have a physical presence in accessible areas in order to provide drop-ins and needle exchange. Removing this presence risks missing opportunities to help people at the point they are motivated to seek support.

**Any conflict of interest declared by any executive member consulted by the decision maker and any dispensation granted by the Proper Officer:**



23 January 2025

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signed

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date