EXECUTIVE BOARD - COMMISSIONING SUB COMMITTEE – 11 JUNE 2014

Subject:	Approval of Crime and Drugs Partnership Funding Allocation Spend			
Corporate Director(s)/	Alison Michalska - Corporate Director Children and Adults			
Director(s):	Candida Brudenell - Strategic Director Early Intervention			
	Peter Moyes – CDP Director			
Portfolio Holder(s):	David Liversidge			
Report author and contact details:	Clare Fox – Strategy and Commissioning Manager 0115 8765711			
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Key Decision	⊿Yes □ No	Subject to call-in	res 🗌	
-		No		
			☑ Revenue	
			Capital	
5 1			⊠ Yes	
City			□ No	
Total value of the decision: £11,831,890Wards affected: AllDate of consultation with Portfolio				
Holder(s): Councillor Liversidge – 28/05/14			8/05/14	
Councillor Chapman - 03/06/14				
Relevant Council Plan Strategic Priority:				
Cutting unemployment by a quarter				
Cut crime and anti-social behaviour				
Ensure more school leavers get a job, training or further education than any other City			City	
Your neighbourhood as clean as the City Centre				
Help keep your energy bills down				
Good access to public transport				
Nottingham has a good mix of housing				
	Nottingham is a good place to do business, invest and create jobs			
Nottingham offers a wide range of leisure activities, parks and sporting events				
Support early intervention activities				
Deliver effective, value for money services to our citizens			\checkmark	
Summary of issues (including benefits to citizens/service users):				
The purpose of this report is to seek authority to allocate Public Health funding, Police and Crime Commissioner (PCC) Grant and partner contributions to the CDP and grant delegated				
authority to the Director of the CDP to allocate funds. This will enable the continuation of				
commissioning responsibilities of the Crime and Drugs Partnership (CDP) and the continuation				
of services across substance misuse and reoffending, Ending Gang and Youth Violence, Hate				
Crime and domestic violence.				
The report also seeks delegated authority to the Director of the CDP for approval to tender				
services and award contracts across a number of areas within substance misuse and criminal				
justice following a detailed review process.				

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Exempt information:

State 'None' or complete the following.

An appendix to the report is exempt from publication under paragraph 3 of Schedule 12A to the Local Government Act 1972 because it contains information relating to commercial confidentiality and, having regard to all the circumstances, the public interest in maintaining the exemption outweighs the public interest in disclosing the information.

Recommendation(s):

1 To approve the anticipated expenditure of Public Health funds by the CDP in 2014/2015 as set out in exempt Appendix 1.

2 To approve the anticipated expenditure of Police and Crime Commissioner funds by the CDP as set out in exempt Appendix 1.

2 To approve the anticipated expenditure of the Partner Contributions by the CDP as set out in exempt Appendix 1.

3 To grant delegated authority to Peter Moyes (Director CDP) to allocate funds for the above expenditure.

4 To grant delegated authority to Peter Moyes to re-tender those services outlined in Appendix 2 (tables B & C) and to award contracts for all funding streams.

5 To approve dispensation from financial regulations 3.29 under corporate contract procurement rule 5.1.2 in respect of those contracts identified in exempt appendix 2 (table D).

1 REASONS FOR RECOMMENDATIONS

- 1.1 The recommendations ensure that the Public Health, PCC and Partner Contribution commissioning responsibilities and contract arrangements are managed in a safe, efficient manner. They ensure that commissioning arrangements are aligned where most appropriate to activity and will enable the CDP to work with providers to secure service continuity where possible.
- 1.2 The actions recommended will allow for relevant and necessary commissioning activity to continue. Continuity of provision is considered essential to maintain service provision and ensure continued progress of the safer agenda and agreed 2020 targets.
- 1.3 The re-tender activities will enable further savings to be identified through commissioning for value for money.
- 1.4 Activities will contribute to ensuring that the CDP commissioning intentions will be fulfilled.

2 BACKGROUND (INCLUDING OUTCOMES OF CONSULTATION)

- 2.1 The CDP has been allocated £9.2m from Public Health, £1.7m from the Police and Crime Commissioner and £0.9m for partner contributions.
- 2.2 A review of commissioning and strategic priorities, current contract arrangements and the history of contracts/previous tendering has been undertaken resulting in a plan to spend these allocations (exempt appendix 1) which will support the delivery of the partnership plan, specifically in relation to reducing substance misuse.
- 2.3 Legal and procurement teams have been consulted throughout the process of the review and determining the recommendations to ensure legal and procurement compliance.
- 2.4 For those services detailed in exempt appendix 2, table E it is proposed that existing arrangements be maintained as they have either recently been tendered or are contributions.

- 2.5 The 3 areas identified as requiring tendering due to a need for service redesign or due to the transforming rehabilitation agenda are detailed in exempt appendix 2 (tables A, B and C).
- 2.6 Dispensation is required for those services detailed in exempt appendix 2, table D, due to the recommendations in the Safe from Harm review and the need for continuation of services.

3 OTHER OPTIONS CONSIDERED IN MAKING RECOMMENDATIONS

- 3.1 Option 1 doing nothing is not the preferred option as it would generate legal implications in terms of the contracts and would disrupt service delivery, risking an increase in crime and health harms.
- 3.2 Option 2 for another department to commission on behalf of the CDP was not a preferred option as it would not enable alignment of commissioning with wider CDP activities.

4 FINANCIAL IMPLICATIONS (INCLUDING VALUE FOR MONEY/VAT)

- 4.1 Re-tendering will allow for value for money and for further savings to be identified beyond the Big Ticket savings.
- 4.2 Dispensation from financial regulations 3.29 and contract procedure rule 5.1.2 is supported for this service by the Chief Financial Officer.

5 <u>RISK MANAGEMENT ISSUES (INCLUDING LEGAL IMPLICATIONS AND CRIME AND DISORDER ACT IMPLICATIONS)</u>

- 5.1 There are no significant legal issues with regard to the proposals set out in this report, however it should be considered what the potential financial and delivery impact could be for the Council should existing contracts be terminated or varied due to expenditure not being approved for allocation.
- 5.2 With regard to the request for a dispensation, such can be granted for operational reasons and these are as set out in the report. On the basis that the contract values are low, the risk to service users if there is a break in service, and the localised nature of the service, such a dispensation on this occasion is considered to be low risk to the Council. However, clear planning must be put in place with regard to the commissioning review to ensure that the Council is in compliance with its duty to secure Best Value and any public procurement requirements moving forward.
- 5.3 It should also be considered that if contracts do need to be terminated or reduced due to funding this could have a significant impact on national and local monitoring requirements, particularly in respect of drug and alcohol treatment services.
- 5.4 Advice will continue to be provided by both the Corporate Procurement and Legal Teams to ensure compliance with governance and procurement requirements.

6 SOCIAL VALUE CONSIDERATIONS

6.1 Recommendations have been considered in line with the Public Services (Social Value) Act 2012. All services within this report aim to improve the social wellbeing of the client groups they target.

7 REGARD TO THE NHS CONSTITUTION

7.1 Local authorities have a statutory duty to have regard to the NHS Constitution when exercising their public health functions under the NHS Act 2006. In making decisions relating to public heath functions we consider the NHS Constitution where appropriate and take into account how it can be applied in order to commission services to improve health and wellbeing.

8 EQUALITY IMPACT ASSESSMENT (EIA)

- 8.1 An EIA is not needed, as the report does not contain proposals for new or changing policies, services or functions, financial decisions or decisions about implementation of policies development outside the Council (exempt appendix 1).
- 8.2 An Equality Impact Assessment is not required for the recommendations in relation to agreement of spend as the proposal is to continue to extend existing provision (exempt appendix 1).
- 8.3 Risk Assessment and Equality Impact Assessments are being undertaken for those services to be tendered.

9 <u>LIST OF BACKGROUND PAPERS RELIED UPON IN WRITING THIS REPORT (NOT</u> <u>INCLUDING PUBLISHED DOCUMENTS OR CONFIDENTIAL OR EXEMPT</u> <u>INFORMATION)</u>

9.1 None

10 PUBLISHED DOCUMENTS REFERRED TO IN THIS REPORT

10.1 None

11 OTHER COLLEAGUES WHO HAVE PROVIDED INPUT

- 11.1 Lucy Putland, Strategy and Commissioning Manager, CDP
- 11.2 Naomi Vass, Senior Solicitor, Contracts and Commercial Team, Legal Services
- 11.3 Dee Fretwell, Finance Analyst, Children and Families, Strategic Finance
- 11.4 Geoff Walker, Acting Director of Strategic Finance
- 11.5 Dawn Cafferty, Procurement Category Manager, Corporate Procurement