

Nottingham City Council Delegated Decision



Nottingham
City Council

Reference Number:

4513

Author:

Alan Lowen

Department:

Strategy and Resources

Contact:

Alan Lowen

(Job Title: Lead Commissioning Manager, Email: alan.lowen@nottinghamcity.gov.uk, Phone: 01158763571)

Subject:

Approval to receive and spend one-off grant to be spent in year 2021/22 for substance misuse services, including criminal justice

Total Value:

614,000 (Type: Revenue)

Decision Being Taken:

1. Approve the receipt of funding of £614,000 from Public Health England for the provision of enhancements to the existing delivery of substance misuse treatment services, with a particular focus on criminal justice interventions.
2. Approve the variation of contracts for existing substance misuse treatment services to enable the delivery of additional activity set out in Appendix 1, in accordance with approvals granted under article 18.99 of the Contract Procedure Rules.
3. Approve spend of £22,671 for the appointment of 0.5 FTE Commissioning Officer within the Council's Commissioning and Market Development Team for a period of 12 months to oversee the implementation and performance management of the additional activity in Appendix 1.
4. To delegate authority to the Director of Commissioning and Procurement to authorise contract variations that arise from this process.
5. To establish and recruit to the 0.5FTE Commissioning Officer post within the Commissioning and Market Development Team for a period of 12 months (Non-Executive Officer Decision under Delegation 16).

Reasons for the Decision(s)

As part of the Public Health England (PHE) funding allocation, a one-off grant has been issued to Nottingham City Council for the provision of additional substance misuse interventions. The grant specifically calls for interventions to be delivered to people involved with the criminal justice system and to aid in the prevention of drug-related deaths.

The short deadline for submission and timescales in which funding must be spent has resulted in a speedy allocation of the funds without the possibility of undergoing a full tender process. In light of this, exemption from Contract Procedure Rules has been approved in order to award grant funding to existing services for the provisions set out in the grant proposals.

The funding awarded by PHE will be used to provide interventions for the prevention of re-offending by increasing targeted and universal support for offenders using substances, including through investment into support for offenders in Black, Asian, and Minority Ethnic (BAME) communities. The existing substance misuse treatment services have had a long-standing target for increasing the number of BAME service users, in line with the local population and national estimates for levels of substance misuse. This funding will allow for improvements in this area which had previously been identified as in need of development.

Nottingham City has seen a relatively small number of drug-related deaths in comparison with other core cities. Whilst this is the case, any avoidable death is too many, and the number of drug-related deaths is now increasing year on year. A person is most at risk of an opioid overdose when they are released from prison, after a period of abstinence, and when they are released from hospital. It has been proven that the risk of dying through drug-related incidents is greatly reduced when engaging with good quality treatment services. The funding allocated to Nottingham City will be used, in part, to enhance existing preventative measures such as increased provision of take-home naloxone (a medicine which temporarily reverses the effects of an opioid overdose), increase in recovery coordinators who specialise in relapse prevention, and increase in the number of workers in the criminal justice treatment service. By increasing investment into this provision, services are expected to be able to engage with many more vulnerable people, with the expected benefits of reducing the risk of further drug-related deaths, improving quality of life for service users, and increasing the likelihood of empowering service users into employment, education and training, among other health and social benefits.

Throughout the Covid-19 pandemic, the specialist needle exchange service, among countless others, has provided a stable support for some of our most vulnerable citizens. The service has proven itself as an asset to the City by engaging and referring people into services that they may have never previously contacted, by providing encouragement and empowering them to access support, such as substance misuse treatment, housing, blood-borne virus screening (to include hepatitis and HIV), mental health services, and improving the general wellbeing of their service users.

Briefing notes documents:

Appendix 1. DDM PHE Universal Bid Contract Length and Allocation Details.docx

Other Options Considered:	<p>1. Undertake a competitive tender process to select providers to deliver the additional activity. The time frame for the use of the funds under the conditions of the grant from Public Health England (for delivery by the start of Q2 2021/22 and for use within one year) means that allowing services to apply for money would significantly reduce the amount of time services are able to deliver the enhancements to provision. Money has been allocated in the bid submitted to Public Health England based on need identified through years of close working with existing providers, and statistics from services and national databases. Therefore this option has been rejected.</p> <p>2. Do nothing. A decision not to take receipt of funds would deny services the opportunity to enhance service provision and the opportunity to improve the wellbeing and support of vulnerable citizens (including the delivery of activity intended to prevent drug-related deaths). Therefore this option has been rejected.</p>
Background Papers:	Bid submitted by Nottingham City Council to Public Health England with details of financial allocation.
Unpublished background papers:	Nottingham City Universal Bid breakdown 2021.docx
Published Works:	None
Affected Wards:	Citywide
Colleague / Councillor Interests:	None
Dispensation from Financial Regulations:	Yes
Consultations:	Those not consulted are not directly affected by the decision.
Crime and Disorder Implications:	<p>The Nottingham City Crime and Drugs Partnership is required to produce an annual Strategic Assessment and Partnership Plan to consider crime, ASB, substance misuse and reoffending in the City signed off by full Council in 2020, in accordance with the Constitution. Substance misuse is a key priority within the Strategic Assessment and Partnership Plan. The Crime and Drugs Partnership is the lead commissioner for substance misuse services in the City, and has robust performance management arrangements in place for these services. It is proposed that these enhancements will be monitored through the same arrangements on a quarterly basis.</p>
Equality:	Please login to the system to view the EIA document: EIA Universal Grant V3.pdf

Regard for NHS Constitution:

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 this decision relating to public health functions, we have properly considered the NHS Constitution where applicable and have taken into account how it can be applied in order to commission services to improve the health of the local community.

Relates to staffing:

Yes

Decision Type:

Portfolio Holder

Subject to Call In:

Yes

Call In Expiry date:

03/02/2022

Advice Sought:

Legal, Finance, Procurement, Human Resources, Equality and Diversity

Legal Advice:

The Council may accept this funding under its General Power of Competence. The Council must ensure that any funding is used in accordance with the funder requirements and any funding terms.

As the contracts that are being proposed to be varied are above threshold for the purpose of procurement legislation then the first consideration is whether legislation would permit such a proposed variation. Given the values of the original contracts, the additional funding and the circumstances and delivery requirements then it is the opinion that these variations would be permitted under Regulation 72(1)(b) of the Public Contracts Regulations 2015.

The Council's Constitution and specifically 18.99 Contract Procedure Rules permit an extension to a contract if it is compliance with the Public Contracts Regulations which this proposal does.

The Council must also consider its Best Value duty in the granting the extension. In considering whether a contract delivers best value regard should be had, not only to the financial value but also any non-financial benefits that will be delivered. Again the report author has set out the benefits to be delivered by the variations and the decision makers may wish to keep in mind that the original contracts were awarded under full tendering conditions so the market had been tested.

Advice provided by Naomi Vass (Senior Solicitor) on 24/12/2021.

Finance Advice:

This decision seeks approval to accept and spend a one-off grant from Public Health England for the delivery of substance misuse treatment services. The decision also seeks dispensation from Contract Procedure Rule 4.1.2 in accordance with Financial Regulation 3.29 to vary existing contracts to enable the delivery of the additional activity as outlined in appendix 1.

The grant, amounting to £0.614m, is to be spent in financial year 2021/22 and must be spent in accordance with any grant term and conditions. The service should monitor spend to ensure only the amount available is spent and to ensure no financial pressure occurs.

As outlined by the author, due to the short timescales involved and the need to spend the grant in 21/22 the allocation of funds are without a full tender exercise. Due to this, approval is sought for dispensation from Contract Procedure Rule 4.1.2 in accordance with Financial Regulation 3.29 to vary existing contracts to the existing providers of the services.

The decision also seeks approval to establish a 0.5 FTE Commissioning Officer for a fixed term period of 12 months at a cost of £22,671 to oversee the activity contained in this decision. This will be also funded from the grant. If any extension to this term or value is needed then further approval with further funding identified will need to be sought.

Advice provided by Philip Gretton (Finance Analyst) on 09/09/2021.

Equality and Diversity Advice:

This proposal could particularly benefit people from different ethnic groups, men, women and disabled people or carers. There are no impacts to any of the protected characteristics and therefore happy to sign off. Advice provided by Rosey Donovan (Equality and Employability Consultant) on 13/10/2021.

Procurement Advice:

This decision relates to the receipt of funding of £614,000 from Public Health England for the provision of enhancements on current provisions of substance misuse services, with particular attention to criminal justice interventions as detailed in Table 1 and Table 2 of Appendix 1. In accordance with Article 18.99 of the Contract Procedure Rules, these provisions can be added to the two current contracts as permitted under Regulation 72 of the Public Contracts Regulations 2015, and are supported from a procurement perspective. The use of this funding should comply with PHE grant conditions and suitable agreements should be in place with external providers to ensure compliance and satisfactory performance.

Julie Herrod Lead Procurement Officer 16th December 2021

HR Advice:

As outlined, management seek authorisation for the approval of funding and spend of £614k from Public Health England (PHE) to be spent in year 2021/22 for substance misuse services, including criminal justice. The decision, if approved, seeks to spend £22,671 of which, on the appointment of a 0.5FTE Commissioning Officer for a period of 12 months on a fixed term contract (FTC) basis.

As the funding for the post is temporary in line with the funding available, any appointment to the post should be on a fixed term or secondment basis and in accordance with the Council recruitment process. Recruitment for the Commissioning Officer post cannot commence until the funding is confirmed and the post established in Oracle.

Should the funding be extended, then the service should be aware of associated redundancy costs after the employees have been in post for 2 years. At this point, the recommendation is for the service to consider making the employees permanent, rather than to continue extending the FTC incrementally. Should the funding be withdrawn after this time, the affected employees should be consulted with accordingly, in line with the Restructuring Principles and Redundancy Guidelines.

It is understood from management that a Commissioning Officer job description already exists which has undergone a job evaluation process and has been evaluated at Grade-H.

Recruitment should follow the current protocols, with consideration for the current vacancy freeze. A business case for recruitment is required, with the support of the relevant Director, and all requests should be submitted through the recruitment portal. The post will be considered for redeployment. The service should ensure that their process is supportive of the Council's Equality, Diversity and Inclusion (EDI) strategy and make every effort to attract a representative pool of applicants.

Management should be aware that the selected candidate should commence on a starting salary of level one within the respective grade, unless the appointed colleague is already in employment at the Council and currently on Level two of the same grade, in which case the employee would be matched over at the rate of pay they currently receive.

There will need to be a support and development plan for the new post holder once appointed in line with managing performance through the probationary policy.

As the post is initially temporary, an appropriate exit strategy must be in place in order to terminate the contract in line with NCC guidance in the event that the post/funding cannot be made permanent at the end of the FTC. Management will need to ensure appropriate timelines are in place to notify the affected employee and give appropriate notice.

Employees should be referred to redeployment in good time, 12 weeks before the end of contract (end of funding), and supported by management throughout the redeployment process.

Advice provided by:

Sheena Yadav-Staples

HR Consultant

Sheena.yadav-staples@nottinghamcity.gov.uk

0115 87 62951

Signatures

Adele Williams (Portfolio Holder for Adults and Health)
SIGNED and Dated: 21/01/2022
Lucy Hubber (DPH)
SIGNED and Dated: 20/01/2022
Clive Heaphy as Chief Finance Officer (Chief Finance Officer) - Dispensation from Financial Regulations
SIGNED and Dated: 20/01/2022
Chief Finance Officer's Comments:

Appendix 1: Proposed Contract Variations – PHE Universal Grant for Additional Drug Treatment, Crime and Harm Reduction

Table 1: Contract variation to Nottingham Recovery Network (Contract Procedure Rule 4.1.2)

Provider organisation	Service name	Activity to be delivered	Value of proposed funding	Period of award	Current contract length	Current contract value
Framework	Specialist Needle Exchange, as part of NRN contract CPU1581	1 FTE Band 5 specialist needle exchange worker	£41,300	12 months	5+1+1 (from July 2016)	Lifetime value - £26,764,773
Framework	Specialist Needle Exchange, as part of NRN contract CPU1581	Develop peer to peer naloxone delivery including training and supervision	£8,350	12 months	5+1+1 (from July 2016)	Lifetime value - £26,764,773
Framework	Specialist Needle Exchange, as part of NRN contract CPU1581	Deliver needles, Naloxone and BBV testing and referral ; 2x Band 4 needle exchange workers @ £56,661 Transport and access to IT @ £3,750 PA	£60,411	12 months	5+1+1 (from July 2016)	Lifetime value - £26,764,773
TOTAL			£110,061			£26,764,773

Table 2: Contract variation to Clean Slate (Contract Procedure Rule 4.1.2)

Provider organisation	Service name	Activity to be delivered	Value of proposed funding	Period of award	Current contract length	Current contract value
Framework	Clean Slate	An additional 2 x residential rehabilitation for Nottingham City criminal justice clients @ £33,000	£66,000	12 months	5+1+1 (from September 2019)	Lifetime value - £6,839,000
Framework	Clean Slate	<p>4 FTE Criminal Justice Drug Workers to work across all criminal justice pathways, including police and probation, to deliver interventions to the most prolific offenders (identifying needs and supporting these service users to leave a life of crime and achieve their capabilities).</p> <p>2 Clinical Consultants to support people with complex needs.</p> <p>1 Prison In-Reach Worker to engage with sentence planning and healthcare in the prisons to identify treatment and support into the community.</p> <p>0.5 FTE band 4 Criminal Justice Worker to engage with Integrated Offender Management @ £28,336</p>	£218,983	12 months	5+1+1 (from September 2019)	Lifetime value - £6,839,000
Framework	Clean Slate	Increase the custody suite cover to offer test on arrest and also assertive engagement of detainees who may have problems with	£61,285	12 months	5+1+1 (from September 2019)	Lifetime value - £6,839,000

Provider organisation	Service name	Activity to be delivered	Value of proposed funding	Period of award	Current contract length	Current contract value
		substances other than are tested for; 1 x band 4 and 1 x band 5 Custody Suite Drug Workers				
Framework	Clean Slate	Additional resource to include CJ clients into the recovery academy to enhance chances for employment, training and education. This recovery community is to offer peer support to those new to the CJ pathway and enhance the success rate of the CJ service.	£48,000	12 months	5+1+1 (from September 2019)	Lifetime value - £6,839,000
Framework	Clean Slate	To create a Street Engagement Team to provide assertive outreach to communities of rough sleepers and beggars whose lifestyles include greater health risks and an increased likelihood of anti-social behaviour and offending. This team is to be equipped with needles and naloxone £53,000. Assertive outreach to engage with the BAME community to deliver harm reduction messages and reduce the chance of criminal behaviour £34,000	£87,000	12 months	5+1+1 (from September 2019)	Lifetime value - £6,839,000
TOTAL			£481,268			

Your proposals for your LA's allocation of the universal component of the £80m						
Your allocation	£614,000					
	Q1	Q2	Q3	Q4	Q5	Sum of quarterly spend
Quarterly breakdown of additional spend	£110,000	£153,000	£153,000	£159,750	£38,250	£614,000
Area	Intervention	Your proposals			Additional spend in 2021-22 from universal grant	% of additional spend
1. System coordination and commissioning	Commissioning support	To performance monitor, implement and support the process throughout the year 0.5 FTE H grade commissioning officer			£22,671	4%
2. Enhanced harm reduction provision	Needle and syringe programmes	The NCC budget for the prescribed type of needle is considered sufficient. However distribution is an issue and staffing the specialist needle exchange needs to be increased 1x Band 5 needle exchange worker FTE = £41,300			£41,300	7%
	Naloxone provision	The NCC budget for take home Naloxone is considered sufficient and would be issued through the specialist needle exchange and outreach. However, we wish to develop peer to peer Naloxone delivery which will include training and supervision fthe cohort and transport cost			£8,350	1%
	Outreach	To deliver Needles, Naloxone and BBV testing and referral would need 2x Band 4 needle exchange workers @ £56,661 Transport and access to IT @ £3,750 PA			£60,411	10%
	Novel long-acting OST	Not required			£0	0%

3. More treatment options	Residential rehabilitation	An additional 2x residential rehabilitation for Nottingham City CJ clients @ "33,000	£66,000	11%
4. Increased integration and improved care pathways	<ul style="list-style-type: none"> • Treatment capacity for police and court custody assessments • Collaboration with L&D, courts and probation • Continuity of care post prison release • Continuity of care from non-criminal justice settings 	4 FTE Criminal Justice drug workers to work across all Criminal Justice pathways including the police and probation to deliver interventions to the most prolific offenders identifying needs and supporting these service users to leave a life of crime and achieve their capabilities. These will be supported by 2x clinical consultants to support those with complex needs. To also implement 1x prison inreach worker to engage with sentence planning and healthcare in the prisons to identify treatment and support into the community. 0.5x band 4 criminaljustice worker to engage with IOM @ £28,336	£218,983	36%
5. Increased treatment capacity to respond to extra diversion	Work with out-of-court disposal schemes and testing on arrest to provide treatment interventions	Increase the custody suite cover to offer test on arrest and also assertive engagement of detainees who may have problems with substance other than what are tested for 1x band 4 Custody suite drug workers. 1x band 5 custody suite drug worker	£61,285	10%
6. Enhanced recovery support	Recovery communities and peer support networks	Provide extra funding to include CJ clients into the recovery academy to enhance chances for employment, training and education. This recovery community would offer peer support to those new to the CJ pathway and enhance the success rate of the CJ service.	£48,000	8%
7. Other interventions	Please see notes worksheet for information about inclusion of interventions outside the menu of interventions	To create a street engagement team to assertively outreach to communities of rough sleepers and beggars whose lifestyles include greater health risks and an increased likelihood of anti-social behaviour and offending. The street engagement team would be equipt with needles and naloxone £53,000. To engage	£87,000	14%

		with the BAME community by assertive outreach in an attempt to deliver harm reduction messages and reduce the chance of criminal behaviour£ 34,000		
Totals			£614,000	100%

Equality Impact Assessment Form

1. Document Control

Control Details:

Title:	Implementation of national funding for the provision of substance misuse interventions for people who are engaged with the criminal justice system and those at risk of harm through using drugs and/or alcohol.
Author:	Beth Hopcraft
Director:	Lucy Hubber
Department:	Strategic Commissioning
Service Area:	Commissioning and Procurement
Contact details:	Bethan.hopcraft@nottinghamcity.gov.uk
Strategic Budget EIA: Y/N (Does this EIA have an impact on the budget)	No
Exempt from publication: Y/N (All EIA's are published on Nottingham Insight for public viewing unless specified. Exemption criteria is available on the EIA section on the Intranet)	No

2. Document Amendment Record:

Version	Author	Date	Approved
1	Beth Hopcraft	11/10/2021	

3. Contributors/Reviewers (Anyone who has contributed to this document will need to be named):

Name	Position	Date
Rosey Donovan	Equality and Employability Consultant	11/10/2021
Helen Johnston	Public Health Consultant	11/10/2021

4. Glossary of Terms

Term	Description
EIA	Equality Impact Assessment
FTE	Full-time equivalent
BAME	Black, Asian and Minority Ethnic

5. Summary

(Please provide a brief description of proposal / policy / service being assessed)

Public Health England issued grants to local authorities for the provision of interventions within existing substance misuse treatment services that will work towards reducing drug-related deaths, specifically within the population of people engaged in the criminal justice system. Nottingham City was awarded a sum of £614,000 to provide: additional resource within the harm reduction and specialist needle exchange service, including outreach provision; additional resource within the criminal justice substance misuse treatment service; additional commissioning resource (0.5 Full Time Equivalent), and; a prison in-reach worker.

As the grants were issued with very little notice, it was not possible to complete an Equality Impact Assessment before application. However, due to the close-working relationship that has been built between commissioners and providers, a dynamic equalities action plan has been developed throughout the life of the contract. It should be noted that this is a retrospective EIA.

Nationally, there is a smaller number of people accessing substance misuse interventions who identify as women and/or who are part of Black, Asian and Minority Ethnic communities. It is the intention of this provision to improve accessibility to substance misuse services and harm reduction interventions by implementing the following:

- A specialist BAME function to sit within the criminal justice substance misuse treatment service
- Increased hours at the harm reduction hub to allow for the service to fit in around people's schedules. This has often been raised as an issue for parents (most commonly women) who are unable to access services during work hours and who have childcare responsibilities.
- A prison in-reach worker to allow for increased engagement with people who are due to be released from prison.
- A 0.5FTE Commissioning Post within Commissioning to manage the contractual requirements.

The proposal is to accept this money and spend in accordance with the national requirements set by Public Health England (now Office for Health Improvement and Disparities).

6. Information used to analyse the effects on equality:

(Please include information about how you have consulted/ have data from the impacted groups)

Due to the short timescales, consultation and data analysis was not completed prior to application. However, the application was written in partnership with our services, including the lead for Black, Asian and Minority Ethnic communities within the treatment service and the service operations manager. The close working relationships that have been formed between service users, workers, managers and commissioners (along with quarterly service reviews) allow for the continuous monitoring and action planning of equalities and service quality.

The learning from the ongoing monitoring of equalities data and consultation informed the application for this grant.

It is widely acknowledged that the proportion of service users within substance misuse treatment services who have a disability is high. Long-term drug and/or alcohol use is likely to result in physical disabilities in some form, and many service users are in contact with secondary mental health services, or have a diagnosis of a mental health condition.

7. Impacts and Actions:

	Could particularly benefit X	May adversely impact X
People from different ethnic groups.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Men	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Women	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Trans	<input type="checkbox"/>	<input type="checkbox"/>
Disabled people or carers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Pregnancy/ Maternity	<input type="checkbox"/>	<input type="checkbox"/>
People of different faiths/ beliefs and those with none.	<input type="checkbox"/>	<input type="checkbox"/>
Lesbian, gay or bisexual people.	<input type="checkbox"/>	<input type="checkbox"/>
Older	<input type="checkbox"/>	<input type="checkbox"/>
Younger	<input type="checkbox"/>	<input type="checkbox"/>
Other (e.g. marriage/ civil partnership, looked after children, cohesion/ good relations, vulnerable children/ adults).	<input type="checkbox"/>	<input type="checkbox"/>
<i>Please underline the group(s) /issue more adversely affected or which benefits.</i>		

<p>How different groups could be affected (Summary of impacts)</p>	<p>Details of actions to mitigate, remove or justify negative impact or increase positive impact (or why action isn't possible)</p>
<p>The grant has been issued to health improve outcomes for people who are engaged with the criminal justice system who are using or in recovery from using drugs and/or alcohol. This includes engaging and maintaining treatment, reducing the harm caused by substance use and drug-related deaths, and encouraging recovery from substance use and misuse.</p> <p>In order to do this, Nottingham City has included the following in the bid:</p> <ul style="list-style-type: none"> - Criminal Justice drug workers to work across all Criminal Justice pathways including the police and probation to deliver interventions to the most prolific offenders identifying needs and supporting these service users to leave a life of crime and achieve their capabilities. - A prison in-reach worker to engage with sentence planning and healthcare in the prisons to identify treatment and support into the community. - Increase the custody suite cover to offer test on arrest and also assertive engagement of detainees who may have problems with substance other than what they are tested for. - Provide extra funding to include Criminal Justice clients into the recovery academy to enhance chances for employment, training and education. This recovery community would offer peer support to those new to the 	

Criminal Justice pathway and enhance the success rate of the Criminal Justice service.

- To create a street engagement team to assertively outreach to communities of rough sleepers and beggars whose lifestyles include greater health risks and an increased likelihood of anti-social behaviour and offending. The street engagement team would be equipped with needles and naloxone.
- To engage with Black, Asian and Minority Ethnic communities by assertive outreach in an attempt to deliver harm reduction messages and reduce the chance of criminal behaviour.
- Increased staffing at the specialist needle exchange and harm reduction service.
- Development of a peer-to-peer naloxone distribution scheme.
- Implementation of an outreach needle exchange and harm reduction provision.

Black, Asian and Minority Ethnic Communities

Nationally, there is a disproportionately small number of Black, Asian and Minority Ethnic people within treatment services when compared with the general population.

Women

Nationally, there is a small proportion of women within substance misuse treatment services when compared to men. Engagement is often challenging for women for many reasons including employment not allowing flexibility to attend appointments, housing challenges, parental status, fear of losing custody of children, domestic abuse and stigma.

People with Disabilities

The grant is to be used to improve accessibility of criminal justice substance misuse treatment services for people who are in BAME communities and in contact with the criminal justice system.

The increased hours of the harm reduction hub will allow for flexibility and may encourage women to access out of traditional business hours.

<p>Long-term drug and/or alcohol use often impacts on a person's physical and psychological health and many service users currently accessing treatment and support have disabilities.</p>	<p>By increasing resource within services, health outcomes for people who have disabilities are likely to increase.</p>
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8. Arrangements for future monitoring of equality impact of this proposal / policy / service:

The grant is inclusive of a 0.5FTE commissioning post who will work to mobilise the provision, monitor its progress and ensure its progress with financial commitments, performance and operational issues. There will be demographic monitoring requirements within the service, and commissioners will work with the provider to ensure access for protected groups is maintained and improved, where possible.

9. Outcome(s) of equality impact assessment:

<input checked="" type="checkbox"/> No major change needed	<input type="checkbox"/> Adjust the policy/proposal
<input type="checkbox"/> Adverse impact but continue	<input type="checkbox"/> Stop and remove the policy/proposal

10. Approved by (manager signature) and Date sent to equality team for publishing:

<p>Approving Manager: The assessment must be approved by the manager responsible for the service/proposal. Include a contact tel & email to allow citizen/stakeholder feedback on proposals.</p> <p>Helen Johnston, Consultant in Public Health helen.johnston@nottinghamcity.gov.uk</p>	<p>Date sent for advice: Send document or Link to: equalities@nottinghamcity.gov.uk</p>
<p>Approving Manager Signature:</p>	<p>Date of final approval:</p>



11 October 2021

Before you send your EIA to the Equality and Employability Team for advice, have you:

1. Read the guidance and good practice EIA's
<http://intranet.nottinghamcity.gov.uk/media/1924/simple-guide-to-eia.doc>
2. Clearly summarised your proposal/ policy/ service to be assessed.
3. Hyperlinked to the appropriate documents.
4. Written in clear user-friendly language, free from all jargon (spelling out acronyms).
5. Included appropriate data.
6. Consulted the relevant groups or citizens or stated clearly, when this is going to happen.
7. Clearly cross-referenced your impacts with SMART actions.

PLEASE NOTE: FINAL VERSION MUST BE SENT TO EQUALITIES OTHERWISE RECORDS WILL REMAIN INCOMPLETE.