


## Executive Decision Taken under Cabinet Delegated Authority

<b>Subject:</b>	Drug & Alcohol Treatment Services: Drug Treatment Medication costs contribution
<b>Director:</b>	Director of Public Health,  Lisa McNally
<b>Key Decision:</b>	No  This report is to enact a cabinet decision, the cabinet report referenced below is the key decision.
<b>Delegation Reference</b>	<p>Cabinet report: 07<sup>th</sup> December 2016 (this report was to seek approval to procure and enter into a contract for an integrated Drug &amp; Alcohol Treatment services)</p> <p>Cabinet minutes: 203/16 Commissioning of Integrated Drug and Alcohol Service Provision (Key Decision Ref. No. PHP03)</p> <p>Cabinet report date: 30<sup>th</sup> August 2017 (this report was to seek exemption to procurement process given only one bidder was left in the process)</p> <p>Cabinet minutes: 144/17 Commissioning of Integrated Drug and Alcohol Service Provision (Key Decision Ref. No. SMBC1607)</p> <p>Cabinet report: 05<sup>th</sup> February 2020 (this report was to seek approval for a variation to the integrated Drug &amp; Alcohol Treatment contract to</p>

	cover a 50% contribution relating to drug treatment medication costs)  Cabinet minutes: 35/20 Drug Treatment Medication Costs
<b>Contribution towards Vision 2030:</b>	
<b>Contact Officer:</b>	Mary Bailey, Addictive Behaviours Programme Manager  Mary_bailey@sandwell.gov.uk

## 1. DECISION RECOMMENDATIONS

(1) That the appropriate Chief Officer utilise their approved delegated authority as per Cabinet approval to undertake the necessary variation to accommodate a maximum of 50% of additional medication costs for 2020/21 period incurred by the commissioned Drug and Alcohol treatment provider Cranstoun.

## 2 Reason(s) for Recommendation

2.1 To enact a Cabinet decision taken in February 2020 to allow the appropriate Chief Officer to undertake the necessary variation to the main Drug and Alcohol Treatment contract held with Cranstoun. The variation is to accommodate a maximum of 50% of additional medication costs for 2020/21 period incurred by the commissioned service. This will ensure buprenorphine prescribing is available as per NICE guidelines for those with opiate dependency needs. The variation is needed due to an unanticipated and unprecedented cost increase when in May 2018 the cost of buprenorphine tablets increased significantly due to a supply issue.

### **3 Alternative Options considered and discounted**

- 3.1 The Council has the option not to provide 50% additional funding. In order for the commissioned service to absorb the full price increase themselves and achieve further cost savings beyond the 50% it would be necessary to delete frontline posts which would negatively impact on service provision. Workers are currently carrying an average caseload of 63. The removal of posts would mean clients would need to be re-allocated across the remaining workforce, leading to reduced capacity, possible waiting times for treatment and compromised ability to provide effective and safe interventions. Additionally, there is a risk that the current service provider may not find it financially viable to deliver the service and withdraw from the contract.
- 3.2 The Council has the option to request the removal of buprenorphine tablets as a treatment for opioid dependency however this would contravene the NHS Constitution and NICE recommendations.

### **4 Purpose of the report**

#### **4.1**

- To enact a Cabinet decision taken in February 2020 to allow the appropriate Chief Officer to undertake the necessary variation to the main Drug and Alcohol Treatment contract held with Cranstoun. The variation is to accommodate a maximum of 50% of additional medication costs for 2020/21 period incurred by the commissioned service. This will ensure buprenorphine prescribing is available as per NICE guidelines for those with opiate dependency needs. The variation is needed due to an unanticipated and unprecedented cost increase when in May 2018 the cost of buprenorphine tablets increased significantly due to a supply issue.
- The variations covering 2019/20 and 2020/21 total no more than £83,000. The 2019/20 amount incurred from the additional buprenorphine cost was £76,704.00 (50% =

£38,352.00) and this variation amount was approved in the cabinet report. The 2020/21 estimated additional buprenorphine cost is £74,291 (50% contribution = £37,146) and it is this period for which the cabinet report obtained approval for delegated authority from the appropriate Chief Officer to undertake the necessary variation.

- Alternative options would be to allow the provider to absorb 100% of the costs however this would have a detrimental impact on frontline capacity. Alternatively to request the commissioned provider to remove buprenorphine as a treatment option for opiate dependent individuals would contravene the NHS Constitution and NICE recommendations.
- The service provider Cranstoun has been closely consulted with who have in turn consulted with people who use the service. There have been extensive discussions via the Association of Directors of Public Health (ADPH) network and regional Public Health England.

## **5 How does this support Vision 2030?**

5.1 Ambition 1 - Sandwell is a community where our families have high aspirations and where we pride ourselves on equality of opportunity and on our adaptability and resilience: Substance misuse treatment enables people, including parents, to become free of dependency benefitting themselves, their families and the community.

5.2 Ambition 2 – Sandwell is a place where we live healthy lives and live them for longer, and where those of us who are vulnerable feel respected and cared for: Buprenorphine is a NICE approved medicine that is prescribed to people who are dependent on opiates such as heroin to support their recovery. Treatment, including opiate substitution therapy is evidenced to prevent drug related deaths. Opiate substitution therapy is associated with reduced risky injecting practices and bloodborne infections. Studies point to a 54% reduced risk of HIV and a 64% reduction in

the risk of hepatitis C infection among patients who have a recent history of illicit drug injecting.

- 5.3 Ambition 3 - Our workforce and young people are skilled and talented, geared up to respond to changing business needs and to win rewarding jobs in a growing economy: The majority of people who access substance misuse treatment for support with opiate dependency are unemployed when they first present. Successful drug treatment can improve an individual's chances of entering and sustaining employment, training or education.
- 5.4 Ambition 5 – Our communities are built on mutual respect and taking care of each other, supported by all the agencies that ensure we feel safe and protected in our homes and local neighbourhoods: Opiate dependency is often funded via acquisitive crime which has a negative impact on communities, businesses and individuals. Studies show effective substitute opiate prescribing has a beneficial impact on acquisitive crime levels.

## **6 Current position/Background Details**

- 6.1 In 2017 a tender was advertised, and a contract subsequently awarded for an integrated adult alcohol and drug treatment services in Sandwell. This was following a substantial review of services and amalgamation of previously separate contracts to benefit from greater efficiencies. This contract was awarded for three years with a reducing annual budget of £3.1 million 2018/19, £2.8 million in 2019/20 and £2.5 million in 2020/21 with an option to extend the contract for two years at £2.5 million per annum.
- 6.2 Buprenorphine is a NICE approved drug used to treat opiate dependency. The NHS Constitution states that local authorities, in the exercise of their public health functions, are required by law to take account of the Constitution in their decisions and actions; Patients have the right to drugs and treatment that have been

recommended by NICE if a doctor says that they are clinically appropriate. Buprenorphine is recommended in NICE Technology Appraisal Guidance TA114.

- 6.3 The cost of buprenorphine tablets increased significantly in May 2018 when, due to a supply issue, a concessionary drug tariff price was agreed between manufacturers and the Department of Health and Social Care. (Concessionary drug tariffs are agreed when there are difficulties in obtaining a medicine at its usual price due to, for example, supply problems, to minimise the impact on purchasers)
- 6.4 Buprenorphine 2mg tablets increased from £1.33 for seven to £6.35 and 8mg tablets increased from £2.38 for seven to £16.15. The buprenorphine price increase was unprecedented and unanticipated.
- 6.5 Sandwell Public Health were approached by the substance misuse provider, Cranstoun, in August 2018. Following receipt of invoices for May and June 2018 they estimated that, due to the buprenorphine price increase, the prescribing budget would be significantly overspent. In light of reductions to overall substance misuse funding there was insufficient flexibility within their budget to cover the cost. Following internal discussions and Director approval, Sandwell Public Health agreed to pay 50% of the overspend which equated to £47,712.37 for 2018/19.
- 6.6 Sandwell Public Health worked closely with Cranstoun to review their budget and working practices in order to identify efficiencies and solutions for subsequent contract years 2019/20 and 2020/21 as below:
- sourcing an alternate supply of buprenorphine in the form of Espranor (a new form of buprenorphine that comes in sublingual wafer form).
  - transferring clients, where appropriate and with their agreement, from buprenorphine tablets to Espranor or Methadone.
  - where clinically indicated, offering Espranor to new initiates

## Consultation:

6.7 The service provider Cranstoun has been closely consulted with who have in turn consulted with people who use the service. There have been extensive discussions via the Association of Directors of Public Health (ADPH) network and regional Public Health England.

## Sustainability:

6.8 The recommended option ensures service provision in line with the NHS Constitution and NICE recommendations for the initial term of the main Drug & Alcohol Treatment contract. Previous work to realise efficiencies by sourcing alternate supplies of buprenorphine help contain the budget pressures. Subject to main contract extension (a permissible 2 years covering 1<sup>st</sup> February 2021 to 31<sup>st</sup> January 2023) future approval may be required if cost pressures continue

## Timescales:

6.9 The proposed recommendation ensures budget pressures are contained for the initial term of the main Drug & Alcohol Treatment contract.

## 7 Implications

<b>Resources:</b>	Financial resource has been identified within the Public Health budget to cover 50% of the estimated additional costs of buprenorphine for 2019/20 and 2020/21.
<b>Legal:</b>	The total value of the contract across the 3 years is £8,134,062; if we factor in the permissible 2-year extension period this equates to a total of £13,152,031 . The variations proposed covering 2019/20 and 2020/21 would total no more than £83,000. Along with the previous 2018/19 variation for £47,712.37 (given for the same reasoning) would total a maximum of £130,712. Regulation 72(5) (b) of

	<p>the Public Contract Regulations 2015, allows for modifications to be made during the term of the contract as long as the modification does not alter the nature of the contract and falls below the relevant procurement threshold and 10% of the aggregated contract value. The recommendations in this report will not take the total value of variations over this threshold.</p> <p>Local Authorities are bound by the NHS Constitution and NICE recommendations in the exercise of their Public Health duties. Furthermore a condition of the Public Health grant requires Local Authorities to “have due regard to the need to improve the take up of, and outcomes from, its drug and alcohol misuse treatment services”.</p>
<b>Equality:</b>	<p>The proposal will ensure provision of NICE recommended medications where clinically indicated and help avoid a ‘postcode lottery’ of provision. This will help ensure those with opiate dependency needs can access recommended pharmacotherapy within the Borough.</p> <p>The proposal would not have any detrimental implications for equality (all aspects and characteristics)</p>
<b>Risk:</b>	<p>If the permissible variation is not enacted we will not ensure buprenorphine prescribing is available as per NICE guidelines for those with opiate dependency needs. This will impact on individuals directly and indirectly affected by substance misuse and will be in contrast to NICE guidance and the Public Health grant condition that requires local public health departments to have due regard to the outcomes from local substance misuse treatment services.</p>
<b>Health and Wellbeing:</b>	<p>Should the permissible variation not be enacted frontline staff numbers would need to be reduced as a result, there would be reduced capacity within the</p>



	service with a risk of increased waiting times for treatment. This may lead to an escalation in alcohol and drug related harms where residents are unable to access treatment in a timely fashion
<b>Other:</b>	

In accordance with the authority delegated to Chief Officers to act on matters within the authority delegated to them under Part 3 of the Council's Constitution, I intend to take the action(s) recommended above.

I do not have an interest to declare in this matter









**Director Public Health – Lisa McNally**

**Date 19/10/2020**


## 8. Appendices


**Cabinet Paper:**


 11 - Commissioning Drug and Alcohol  
 Integrated Drug and Alcohol Service 2018 - CabineSandwell Drug and Al  
 06 - Redesign of  
 Report\_to\_Cabinet\_\_\_\_  
 Buprenorphine Nov20

 Risk\_Register  
 Quality Assurance  
 BuprenorphineNov20Sheet - Drug Treatme

### Cabinet Minutes:

 Cabinet Minutes -  
 Buprenorphine contrilnet\_7\_December\_201

 Minutes\_of\_the\_Cabi  
 Minutes Cabinet June 2016.pdf

 Cabinet Minutes  
 Cabinet Minutes 30.08.2017.pdf

## **9. Source Documents**

Methadone and Buprenorphine for the Management of Opioid Dependence, NICE Technology Appraisal Guidance TA114:

<https://www.nice.org.uk/guidance/ta114>

The NHS Constitution:

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/480482/NHS\\_Constitution\\_WEB.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/480482/NHS_Constitution_WEB.pdf)

Public Health Grant Circular:

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/767140/DHSC\\_allocations\\_circular\\_template\\_final\\_1.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/767140/DHSC_allocations_circular_template_final_1.pdf)