

Meeting: Policy Development Decision Group (Joint Commissioning Team)

Wards Affected: All

Report Title: Procurement of a Needle and Syringe Equipment Supplier for Pharmacy based Needle Exchange Services

Is the decision a key decision? No

When does the decision need to be implemented? To commence new service 01 October 2018

Executive Lead Contact Details: Councillor Derek Mills, Elected Lead for Health and Wellbeing, derek.mills@torbay.gov.uk

Supporting Officer Contact Details: Ian Tyson, Acting Head of Public Health Improvement, 01803 207314, <u>ian.tyson@torbay.gcsx.gov.uk</u>

1. **Proposal and Introduction**

- 1.1 The Public Health team has a contract for provision of Needle and Syringe Equipment and collection/disposal of associated waste for Torbay pharmacy "Needle Exchange Services". Provision is currently contracted to Daniels Healthcare Limited, and the contract expires on 30 September 2018.
- 1.2 Re-procurement of the provision of needle and syringe equipment for pharmacies will need to take place during 2018, with a required start date of 1 October 2018.

2. Reason for Proposal

- 2.1 Needle Exchange services are a fundamental element of Protecting the public's health by preventing HIV, Hepatitis B and C and other blood borne viruses which can occur at epidemic levels when people who use drugs share needles and other drug injecting equipment.
- 2.2 Supply of needle and syringe equipment is a demand-led service which will cost an estimated £80,000 per annum, based on current activity levels. The contract will be procured jointly with Devon County Council to maximise economies of scale, and is expected to be for a three year term, with option to extend for a further one + one years.
- 2.3 Pharmacy based needle and syringe equipment exchange services are for some injecting drug users the only source of health support they receive, as well as a gateway for entry into drug treatment services,. Pharmacy based needle and

syringe equipment exchange services provide 'harm reduction' advice to an otherwise 'difficult to reach' group of people.

3. Recommendation(s) / Proposed Decision

- 3.1 That the Director of Public Health be authorised to procure a supplier of needle and syringe equipment for pharmacy based Needle Exchange Services, through joint procurement exercise with Devon County Council Public Health team.
- 3.2 That the Director of Public Health, in consultation with the Chief Finance Officer and the Executive Lead Member for Health and Wellbeing, be given delegated authority to award the successful bidder, on a best value basis, with the offer of the contract on behalf of Torbay Council.

Background Documents

none

Report Clearance

Report clearance:	This report has been reviewed and approved by:	Date:
Chief Executive	Steve Parrock	
Monitoring Officer	Anne-Marie Bond	
Chief Finance Officer	Martin Phillips	
Relevant Director/Assistant Director	Caroline Dimond	

Section	1: Background Information				
1.	What is the proposal / issue?				
	This request is made for permission to re-procure a supplier of needle and syringe equipment and for the removal of associated waste for pharmacy based Needle Exchange Services.				
	That the Director of Public Health be given delegated authority to award the contract on behalf of Torbay Council, on the basis of 'best value'.				
2.	What is the current situation?				
	There is a current supplier of needle and syringe equipment, namely Daniels Healthcare Limited, and the contract between Torbay Public Health Team and Daniels Healthcare Limited expires on 30 September 2018. Current contract is held by Devon County Council with Torbay Council having third – party rights.				
3.	What options have been considered?				
	The options considered have included:				
	Not procuring a needle and syringe equipment supplier for Torbay – this is not a favourable option because:				
	 It would mean that prevalence and incidence of infections related to injecting drug use (for example hepatitis C, HIV and other bacterial infections) would increase through people sharing needle and syringe equipment. These infections are unlikely to be contained to the drug using population. It would mean that Torbay would have a significant risk of being the centre of an outbreak of infections relating to drug use (for example, hepatitis C, HIV and other bacterial infections). A decision not to procure a needle and syringe equipment supplier would have an associated reputational cost for Torbay Public Health team, and the wider local authority. The provision for safe and effective disposal of returned needles and equipment would cease and therefore the likelihood of finding loose or dumped needles in public places will increase. There would be an adverse impact to emergency services, such as South West Ambulance Service Foundation Trust. South Devon and Torbay Clinical Commissioning Group and Torbay and South Devon NHS Foundation Trust. It would be costly in terms of budget and activity to health partners. Health and local authority partners would have difficulty in communicating 'harm reduction' messages to people who inject drugs, as Needle Exchange Services are often the only touch point injecting drug users have for health advice around their drug using practices. Drug related deaths would increase. Efforts to obtain needles on the 'black market' would increase. 				

	viruses, including hepatitis C, hepatitis B and HIV from sharing needles.				
4.	How does this proposal support the ambitions, principles and delivery of the Corporate Plan?				
	This proposal supports the principles of using resources to best effect and promoting a prosperous and healthy Torbay by focussing on prevention of blood borne viruses. It is recognised that vulnerable groups are more likely to inject drugs, and this includes people who are homeless, those who are, or have been in care and adults and children who have had adverse childhood experiences. It will protect the public by reducing the incidence of drug using equipment being dumped in the public domain or being placed in general waste.				
5.	How does this proposal contribute towards the Council's responsibilities as corporate parents?				
	Among young people, vulnerable groups are more likely to inject drugs:				
	 Young offenders and those who are homeless or involved in sex work. Those excluded from school. Young people with parents who have drug or alcohol problems. Those who have been/are in care. 				
6.	P. 23, NICE Guidance PH52 (2014) How does this proposal tackle deprivation?				
	Supply of needle and syringe injecting equipment and removal of the associated waste prevents illness associated with people who live in deprived communities or with significant disadvantage. It supports those people from increasing their health and other inequalities.				
7.	Who will be affected by this proposal and who do you need to consult with?				
	• The contract with the incumbent service provider would cease on 30 September 2018. There is no 'case management' of service users in Needle Exchange Services and, as such, the exit plan for the users of the incumbent provider is not felt to be complex.				
	 Service uses would continue to access the same service levels, and see no substantive change to their equipment – they may however experience needle and syringe equipment in different packaging and this is something that users of the service can find important. We would aim to procure a supplier of needle and syringe equipment who would undertake the necessary communications with the pharmacies, to provide a message to service (end) users to reassure them of any concerns. 				
	 Pharmacies would need to be communicated with, with new details for ordering and products on offer. 				
	It is not considered that a formal consultation with the public is required in order to re-procure a new supplier on a best value basis, using the existing service model.				

8.	How will you propose to consult?
	We do not propose to consult at this time, as above.

Section 2: Implications and Impact Assessment				
9.	What are the financial and legal implications?			
	The re-procurement of a new needle and syringe and associated waste collection supplier has been built into the baseline budget. Costs have been modelled using current demand, but this is a needs-led service. As such, costs may go up as well as down during the lifetime of the contract. However, sophisticated analysis of the trends during the year/contract period have been undertaken so that Public Health commissioners will not be taken unawares by unforeseen increasing costs.			
	There are legal implications in as much as this contract will need to be procured on the open market in line with local government procurement legislation.			
10.	What are the risks?			
	If permission to re-procure is not granted, there are several health related risks to the population of Torbay, starting with the injecting drug using population but not limited to this group.			
	 Risk and likelihood that prevalence and incidence of infections related to injecting drug use (for example hepatitis C, HIV and other bacterial infections) would increase through people sharing needle and syringe equipment. These infections are unlikely to be contained to the drug using population. Risk and likelihood that Torbay will be the centre of an outbreak of infections relating to drug use (for example, hepatitis C, HIV and other bacterial infections). A decision not to procure a needle and syringe equipment supplier would have an associated reputational risk for Torbay Public Health team, and the wider local authority. Risk and likelihood that without the safe and effective disposal of returned needles and equipment the likelihood of finding loose or dumped needles in public places will increase, thus increasing the risk of spreading any blood borne virus' into the wider non-drug using community. Risk and likelihood of adverse impact to emergency medicine services, such as South West Ambulance Service Foundation Trust, South Devon and Torbay Clinical Commissioning Group and Torbay and Southern Devon NHS Foundation Trust. It would be costly in terms of budget and activity to health partners. Risk and likelihood that drug related deaths would increase. Risk and likelihood that criminality, specifically break-ins to obtain new needles, would increase. 			
11.	Public Services Value (Social Value) Act 2012			
	It is considered that there is a full and open re-procurement exercise required in order to appoint a supplier.			

12.	What evidence / data / research have you gathered in relation to this proposal?			
	NICE Guidance PH49 – evidence base is well established, documented and understood. Not having a supplier of needle and syringe equipment would indicate poor understanding of public health foundational principles, and the cost benefit of avoiding epidemic of blood borne viruses including Hepatitis C and HIV.			
12.	What are key findings from the consultation you have carried out? Key finding from NICE research is to provide needles and syringe injecting equipment, free of charge and free of judgement to people who inject drugs, including for image enhancing drugs and illicit tanning or diet treatments. This research also indicates that an element of this provision is the safe and effective removal of associated waste.			
13.	Amendments to Proposal / Mitigating Actions Not applicable.			

Identify the potential positive a	nd negative impacts on spe	cific groups	
	Positive Impact	Negative Impact & Mitigating Actions	Neutral Impact
Older or younger people			No differential impact
People with caring Responsibilities			No differential impact
People with a disability			No differential impact
Women or men			No differential impact
People who are black or from a minority ethnic background (BME) (<i>Please</i> note Gypsies / Roma are within this community)			No differential impact
Religion or belief (including lack of belief)			No differential impact
People who are lesbian, gay or bisexual			No differential impact
People who are transgendered			No differential impact
People who are in a marriage or civil partnership			No differential impact
Women who are pregnant / on maternity leave			No differential impact

	Socio-economic impacts (Including impact on child poverty issues and deprivation)		No differential impact
	Public Health impacts (How will your proposal impact on the general health of the population of Torbay)		No differential impact
14	Cumulative Impacts – Council wide (proposed changes elsewhere which might worsen the impacts identified above)	None	
15	Cumulative Impacts – Other public services (proposed changes elsewhere which might worsen the impacts identified above)	None	