

Meeting:	Executive
Meeting date:	2 June 2026
Report of:	Peter Roderick, Director of Public Health
Portfolio of:	Councillor Lucy Steels-Walshaw, Executive Member for Health, Wellbeing and Adult Social Care

Commissioning of additional drug and alcohol support services in York

Subject of Report

1. This report summarises current progress to address substance use in York, to support our residents who use drugs and alcohol, minimise individual harm, and to collaborate with partners to reduce the harm to society caused by alcohol and drugs.
2. Specifically, the report seeks delegation and approval to allocate additional funding through a variation to our existing contract with Change Grow Live Services Ltd (CGL) for 2026/2027 and 2027/2028, for additional Drug and Alcohol prevention, treatment and recovery support in York.
3. It also seeks delegations regarding a potential further variation (at CYC's discretion), in 2028/2029.

Benefits and Challenges

4. The benefits of reducing drug and alcohol use are first and foremost to individuals whose lives are harmed by addictive substances. Drug related deaths have doubled over the last ten years, and in 2023 there were 8,275 alcohol-related deaths in the UK. There is a reciprocal relationship between socioeconomic factors, for instance homelessness, housing issues, poor mental health, and drug and alcohol dependence.

5. The societal gains in prioritising work to prevent and treat substance use, and help people maintain recovery outcomes, are huge, including the benefits of the full participation in work, family and civic life of those who would otherwise be held back by drugs and alcohol.
6. The challenges arise from the complex nature of preventing drug and alcohol use, ranging from the availability and heavy marketing of alcohol products to the way in which drug supply and demand is inextricably linked to criminal activity, much of it organised crime.
7. Locally, the chief challenge is around piecing the 'system' together around drugs and alcohol, including partners such as trading standards, hospitality, public health, voluntary sector, social care, education, the NHS, police, probation, and prison services. Some extra resource described below has enabled greater partnership work in York over the last 3 years, however as ever, this resource is stretched thinly and challenges partners to deliver all that is required.

Policy Basis for Decision

8. The Council plan 2023-2027 commits to 'Support more people on their journey of recovery from addiction, including through smoking cessation services and our recovery-based drug and alcohol model'.

Financial Strategy Implications

9. The financial resources committed in this paper come from the Public Health Grant for York (£10,416,727). In 2026/27, this grant was consolidated with the Drugs and Alcohol Treatment and Recovery Integrated Grant (DATRIG), however the grant conditions on the Public Health Grant require the council to ringfence the consolidated amount of drugs and alcohol spending (£3,020,259) to only be spent in this area.
10. As part of the spending plan for this resource this paper seeks approval to vary the contract currently held by the council with CGL, to add £335,400 in 2026/27 and £345,400 in 27/28 to the contract (aligning with the term of the contract which starts in Q2). This does not require any new commitment from the Public Health grant beyond that already planned.

Recommendation and Reasons

11. Executive is asked to:

- Delegate to the Director of Public Health, in conjunction with the Director of Finance and Director of Governance and Monitoring Officer, approval to agree and enter into a contract variation for the current contract held by Change Grow Live Services Ltd to the sum of £335,400 to provide additional drug and alcohol support services in York in 2026/7 and £345,400 in 2027/8.
- Delegate to the Director of Public Health, in conjunction with the Director of Finance and Director of Governance and Monitoring Officer, the discretion and power to:
 - (a) potentially uplift the Contract Value by up to £300,000 for 2028/2029 in accordance with existing pricing review clause; and
 - (b) agree and enter into any related Deed of Variation.

For clarity, this power is to be discretionary for the delegee and, in accordance with the contract, there is no guarantee of any uplift to the provider by virtue of this delegation. The decision regarding any future contractual uplift (if any) shall be made by the delegee at a later stage considering budgets and in conjunction with support from CYC Legal Services and Procurement.

Reason: To ensure the continuity and expansion of key services to support drug and alcohol prevention, treatment and recovery in York, in line with national targets.

Background

12. On the 22 November 2022, Executive delegated the Director of Public Health in consultation with the Director of Governance, to tender a new contract for the provision of alcohol and drug services in York and to accept the bid for this contract which scores highest on the evaluation criteria, and to award and sign a contract.
13. This tender process was undertaken and CGL were awarded the contract on an initial contract period of 5 years + an option for the

council to extend for up to a further 5 years basis to deliver drug and alcohol services in York commencing in July 2024.

14. The government have invested significant additional resource into the drug and alcohol treatment and prevention system in England, since the publication of the national drugs strategy ('From Harm to Hope') in 2021.
15. Since the publication of the national strategy, each local authority area has been required to put in place a Combatting Drugs Partnership (locally this is referred to as York Drug and Alcohol Partnership) and appoint a Senior Responsible Owner for work around drugs and alcohol, which in York is the Director of Public Health.
16. Through this partnership, a collaborative approach has been taken to the additional resource which York has received through several iterations of government grants, namely the Supplementary Substance Misuse Treatment and Recovery Grant (SSMTRG) and Drug and Alcohol Treatment and Recovery Integrated Grant (DATRIG), as well as the Individualised Personalised Support (IPS).
17. Over the last four years, these grants have supported a broad mix of service delivery, system capacity and one-off developments, including:
 - Several posts within the York Drug and Alcohol Service (CGL) which a particular focus on criminal justice pathways
 - Strategic commissioning leadership in public health as well as a frontline post around recovery engagement to enable the establishment of the Recovery Hub at Wellington Row
 - A post within CYC Children's Social Care
 - A role within the Mental Health Access Team (TEWV)
 - Residential rehabilitation placements
 - One-off commissioned outputs (JSNA chapter, insights report, drug-related deaths analysis)
 - Joint commissioning of drug analysis with North Yorkshire
 - Support for people affected by another person's substance use
 - Harm reduction measures, for instance the roll-out of naloxone across services in York

- Employment and skills support using the IPS approach, provided by York Learning.
18. In 2026/27 the Public Health Grant for York (£10,416,727) has been consolidated with the Drugs and Alcohol Treatment and Recovery Integrated Grant (DATRIG), with the grant conditions on the Public Health Grant requiring the council to ringfence the consolidated amount of drugs and alcohol spending (£3,020,259) to only be spent in this area.
 19. Between 2026/27 and 2028/29, partners have agreed that York will build upon the good work detailed above, and continue to strengthen the drug and alcohol prevention, treatment and recovery system, working within the Public Health Grant allocation while recognising the modest increase to the grant over this period. The focus will be on using this uplift responsibly to secure long term financial sustainability, protect essential services, and drive measurable improvements in quality and outcomes.
 20. Three areas of focus have been chosen, which alongside maintaining previous investment will enable York to prioritise several key areas for further development and enhancement:
 - Recovery: expanding peer support, strengthening community-based recovery networks, and improving pathways into education, employment, and stable housing.
 - Alcohol prevention and early identification for adults and Children and Young People: increasing capacity for brief interventions, targeted outreach, and family focused support, and embedding prevention activity across schools, alternative provision and youth services, primary care, and community settings.
 - Increasing efficiency and integration across the system: streamlining pathways, reducing duplication between providers, improving data sharing, and deepening collaboration with, but not limited to; mental health, sexual health, primary care, pharmacy criminal justice, and housing services to create a more coherent and accessible treatment offer. Whilst also ensuring lived experiences voices are heard.
 21. By focusing on these priorities and aligning resources with the areas of greatest need and impact, York will continue to deliver a

safe, effective, and recovery focused system that remains resilient despite ongoing financial pressures.

22. Whilst the above are the key strategic priorities identified locally, as part of the assurance process to the Joint Combating Drugs Unit (JCDU) a Narrative Plan 2026-2028 has been agreed and was submitted by the council to the Unit in April 2026. This demonstrates the breadth of how this resource needs to be used to meet the key objectives set out in the national strategy in local work; it also demonstrates the scale of the expectation on drug and alcohol systems locally, versus a relatively modest increase in the funding available.
23. The Narrative Plan 2026-2028 sets out our approach in York to:
 - System coordination and commissioning
 - Reducing Drug and alcohol related deaths
 - How our local services engage with our regional inpatient detoxification programme (through our IPD consortium)
 - Prevention, early intervention for under-18s
 - Specialist treatment services for under-18s
 - Prevention and early intervention for adults
 - Harm reduction provision e.g. naloxone
 - Access to treatment
 - Supporting parents/carers with alcohol and/or drug problems
 - Housing support interventions
 - Individual Placement and Support (employability and skills)
 - Support for adults in recovery
 - Care pathways and interventions for people with co-occurring needs in relation to physical and mental health support, and wider wraparound care
 - Workforce development
 - People with experience of the criminal justice system
 - People with experience of co-occurring poor mental health
 - People experiencing or at risk of rough sleeping
 - Supporting women experiencing substance use issues
 - Other protected characteristics and inclusion health populations
24. Our additional resource to meet these objectives has been allocated internally in the council and well as through contracts with a variety of providers externally. The variation covered by this

paper relates only to the additional resource proposed to be given to the existing CGL contract; this will be used to:

- maintain increased capacity within the criminal justice system. This will ensure specialist workers can continue delivering criminal justice assessments and strengthening pathways into treatment. These improvements have already contributed to more individuals moving from CJ referral into structured treatment.
- support a full-time specialist addictions psychiatrist. This role provides clinical leadership, driving the development and ongoing improvement of effective clinical pathways with mental and physical health partners. The post also holds responsibility for chairing Multi-Disciplinary Team meetings to support better care decisions.
- enable the recruitment of an additional key worker to help reduce caseloads across the wider team
- support a role focused on harm reduction, with a particular emphasis on Blood Borne Viruses
- a Children and Young People's Resilience Worker (Youth Justice Service Lead) and a Children and Families Worker focused on the impact of parental substance use.

Consultation Analysis

25. The York Drug and Alcohol Partnership includes a wide range of partners: Public Health, CGL, the voluntary sector, York Healthwatch, children's and adults social care, education, York and Scarborough Hospital NHS Trust, Tees Esk and Wear Valley Mental Health NHS Trust, primary care, North Yorkshire Police, HM Prison and Probation Services, York in Recovery, together with people with lived experience. The Partnership has been consulted and engaged on the use of this grant, including the agreement of priorities and the Narrative Plan submitted to the JCDU.

Options Analysis and Evidential Basis

26. Members are asked to approve the variation in the contract the council holds with CGL. The justification for this option is that a large proportion of this funding needs to be spent within the existing drug and alcohol services, who are well placed to deliver the outcomes required in the national guidance.
27. An alternative option exists to not commit the funding to the existing provider and instead seek alternative provision which would meet the governments objectives through the public health grant. This is not recommended. As well as the additional commissioning this would entail, placing delivery timescales at risk, the additional support programmes detailed in this paper need to be integrated into the larger drug and alcohol treatment system which is provided by the current provider in order to be effective.

Organisational Impact and Implications

Financial

The financial resources committed in this paper come from the Public Health Grant for York (£10,416,727). In 2026/27, this grant was consolidated with the Drugs and Alcohol Treatment and Recovery Integrated Grant (DATRIG), however the grant conditions on the Public Health Grant require the council to ringfence the consolidated amount of drugs and alcohol spending (£3,020,259) to only be spent in this area.

The full budget envelope for £335,400 in 2026/27 and £345,400 in 2027/28 is affordable from the drugs and alcohol ringfenced monies of the consolidated Public Health Grant and is included in the 5-year planned forecast and does not require any new commitment from the Public Health Grant beyond what is already planned.

Human Resources (HR)

Any HR implications of this paper will fall to a third-party provider of services who will follow their organisational HR policies and procedures.

Legal

Variation to contract for 2026/2027 & 2027/2028

The contract was tendered in accordance with accordance with the Public Contracts Regulations 2015 (“PCRs”). The PCRs apply to these proposed variations.

The contract was tendered including and permitting potential yearly uplifts of up to £300,000 (at the Council’s discretion and subject to budgets). As such, CYC may rely on PCR Regulation 72(1)(a) that permits modifications where they are sufficiently covered in the initial procurement documents and by appropriate review clauses in the contract.

Regarding the proposed additional value beyond the £600k option already in the contract, CYC may rely upon PCR Regulation 72(1)(f) and (5). This applies where a proposed modification value is both less than relevant threshold and 10% of the initial contract value and also does not arguably change the overall nature of the contract.

Any variation will need to be set out within a Deed of Variation, that Legal Services can assist with.

Potential variation to contract - 2028/2029

As above, the tender and contract contained a pricing review mechanism permitting CYC (at its discretion) to potentially add up to an additional £300k per year.

If at a later stage CYC wished to utilise its discretion to vary the contract for this period up to £300,000 could be added in accordance with PCR Regulation 72(1)(a) as above).

If at a later date CYC proposed to add any sums above the £300,000, CYC Legal Services and Procurement will need to be consulted initially and advice provided in accordance with PCR Regulation 72, the Council’s own Contract Procedure Rules (“CPRs”) and any other related law

Any approved variation would again need to be enacted by way of a Deed of Variation.

Procurement

The York Drug and Alcohol Treatment & Recovery Service was subject to an openly advertised Open procedure procurement in October 2023. The council received a number of tender submissions which were

evaluated and a recommendation to award this contract to the bidder that finished first on the Quality/Price evaluation criteria scoring which was Change, Grow, Live, and was approved. This contract commenced from 1st July 2024 for an initial contract period of 5 years and an option to extend for up to a further 5 years and this contract can be varied subject to the appropriate legal advice and compliance with the council's Contract Procedure Rules (2025) and delegated authority approvals being obtained. There are extension options available within this contract and where the appropriate considerations of satisfactory performance of the provider are considered and establish whether the contract extension will deliver Best Value to the council. The approval for any contract extension must be given by an Officer with the appropriate level of delegated authority in writing.

Health and Wellbeing

Investment in drug and alcohol treatment services and in supporting recovery will support the health and wellbeing of some of York's most vulnerable residents and indirectly impact a large number of health outcomes, such as preventable disease, family health, and community wellbeing.

Environment and Climate action

There are no Environment and Climate action implications for this paper.

Affordability

Drugs and alcohol dependence impacts negatively on individual and family income, often in extreme ways, and the support offered by treatment services will have a positive impact on affordability issues in the city.

Equalities and Human Rights

See attached Human Rights and Equalities assessment, which has been developed in conjunction with the council's lead in this area and identifies four key actions which will be taken forward.

Data Protection and Privacy

Data protection impact assessments (DPIAs) are an essential part of our accountability obligations and is a legal requirement for any type of processing under UK data protection and privacy legislation. Failure to

carry out a DPIA when required may leave the council open to enforcement action, including monetary penalties or fines.

DPIAs helps us to assess and demonstrate how we comply with all our data protection obligations. It does not have to eradicate all risks but should help to minimise and determine whether the level of risk is acceptable in the circumstances, considering the benefits of what the council wants to achieve.

Completion of the DPIA screening questions identified that a DPIA will be required following the approved recommendations and options from this report.

Communications

There are no communications implications for this paper.

Economy

The delivery of employability support (IPS) within the wider investment in drug and alcohol services in York will contribute to economic growth through improving employment opportunity and skills in the city.

Risks and Mitigations

28. There are no immediate risks to varying this contract, which would simply ensure the procurement route can be approved for resource to flow to CGL for the provision of addition Drug and Alcohol Services in York.
29. Wider risks within the drugs and alcohol system have been noted above, including the complexity of partners arrangements, the drugs market and trends in population level drug and alcohol use, and the high level of national ambition in this area together with relatively modest funding increases for the York system.

Wards Impacted

30. All wards are impacted by this decision.

Contact details

For further information please contact the authors of this Decision Report.

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Background papers

[From harm to hope: A 10-year drugs plan to cut crime and save lives - GOV.UK](#)

Annexes

Annex A: Human Rights and Equity Assessment (HREA)