"I'll keep the house and the kids, you get the dog"

Steve Hamer compares the terms of the Prison Service's commissioning programme to a Hollywood marriage.

> ver the past eighteen months, the Prison Service in England and Wales has pursued an extensive programme of contracting to increase the range and number of treatment services available to prisoners with drug misuse problems. Every prison now provides access to treatment in some form. Funded by the first Comprehensive Spending Review in 1998, completed development brings into a single treatment framework and commissioning plan all anti drugs activity including those activities that had hitherto been contracted by individual establishments, area offices or by other service commissioners such as health authorities.

The Drug Strategy Unit

Between October 1998 and August 1999, the Prison Service's Drug Strategy Unit devised and implemented the commissioning programme, the net result of which is far better than anyone might have imagined given that the process required:

- The identification of need at establishment and area level
- The determination of resource allocation through internal bidding
- The development of service specifications, including consultation with major providers
- Consultation with key stakeholders such as Drug Action Teams
- The tendering of contracts.

Inevitably, given the challenging timetable and the scale of development, there were tensions and strains experienced on both sides of the commissioning divide. Nonetheless, the outcome has been extraordinarily good and everyone involved in the enterprise at establishment and area level, in the Drug Strategy Unit, in procurement and within the field of providers, can be proud of the achievement.

Many outstanding matters

should be relatively easy to resolve. However, there are other issues that may prove intractable since they are rooted in an unhelpful approach to contracting; if that approach continues it may inhibit progress on even the most easily solved problems. The flaws that have impeded the execution of the commissioning plan and threaten the relationship between purchaser and provider often betray a hardnosed attitude to external providers and suffer from an absence of partnership.

Working in partnership

With many years of experience in contracting (including contracting with prisons), Compass believes that the partnership approach is essential for a lasting and healthy relationship in that it recognises:

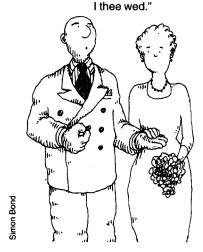
- benefits for each partner that are openly stated and freely given
- the investment that each partner makes in skills and resources
- the equal status of partners, their joint responsibility and authority for the success of the partnership.

Rather like a marriage, partnership must be built on clarity of roles, expectations, conduct and communication. It requires at its heart compatibility, with partners having shared values and shared objectives. Partnership is an investment by the purchaser which can be enhanced through joint responsibility for problem solving and future development. Like any other investment, the purchaser can withdraw in the event of failure but the emphasis on joint actions throughout the contract protects the investment and obtains best value beyond the initial point of contracting.

Sadly, recent experience with the Prison Service is of contracts that seek to load demand on providers and limit the responsibilities of the purchaser; they seem to have been less about partnership and closer to marriage Hollywood style, with contract terms that anticipate divorce and



"And with this ring, nuptial contract, independent inventory and itemized bill...



ensure that the division of the family spoils is one sided.

Tension and conflict

From the very beginning, at the point of commissioning services to meet the twin objectives of the *Prison Service Drug Misuse Strategy* and *Tackling Drugs to Build a Better Britain*, providers experienced tensions in their relationship with the Prison Service.

In terms of determining the specific content of the treatment programmes, the Prison Service established a reasonably open and effective process, engaging external consultants and involving providers in detailed discussions on the development of service specifications, client assessment, casework recording systems and benchmarks on staffing and costing. This was a good basis for partnership. However, the

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partnership was compromised because the development timetable set by the Prison Service was not significantly adapted and there was little opportunity to implement provider recommendations for improving the options for successful outcomes.

The principle challenge was to recruit 280 posts nationwide, in the two months from the award of contracts at the end of July to the intended operational start date of the first of October. The Prison Service was advised by providers that it would normally take between three and four months to recruit to a single vacancy and that recruitment on the planned scale would be subject to the availability of appropriately qualified and experienced staff. Although sharing concerns about the potential skills shortage in the field, the Prison Service rejected proposals to invest in a central recruitment and training initiative. Furthermore, the two month recruitment target was used as a competitive measure of the ability of providers to manage contracts.

Rather than resolve a common problem through creative joint action the burden for managing the predicted skills deficit was loaded on providers.

A further example of preparation for eventual divorce, is that the marriage contract outlines custody rights over the product of the union. Retaining the intellectual property rights over the services that are developed within the contracts, the Prison Service can reduce the role providers have in creating and owning services, even though the models used within the treatment framework have often been imported by external providers such as Compass, Cranstoun and RAPT, in some cases over many years of activity underwritten by other statutory purchasers and from voluntary sources.

There are other examples of an absence of partnership in contracting. Arguably the most disturbing is the arbitrary introduction, at the post tender stage, of drug testing for external treatment providers. This is both cynical and discriminatory in that

it will be introduced first for one group of workers rather than for all staff working in prison. Concern about the impact on providers and their ability to recruit and retain staff appears not be an issue for the Prison Service; neither does protection of the investment that it has made in that recruitment. Crucially, the burden for litigation under employment law or the new human rights legislation may well be pushed onto providers.

However, I would not wish to commit the greatest of all crimes in any partnership and overlook validation in favour of complaint. The Prison Service has undertaken a massive enterprise in the development and implementation of its drugs strategy and the results to date are remarkable. In its response to drug misuse, the service has made greater advances over the past ten years than other organisation; admittedly, having had further to travel it has done so quickly and effectively. Progress toward more sophisticated commissioning and purchasing of services at all levels is vital but there are signs that this is happening and over the years Compass has experience of many prisons embracing partnership with genuine enthusiasm and to great effect.

We are not at the end of a journey, but at the beginning. The road will be smoother if we proceed as partners. There are a number of initiatives that we can undertake together that will ensure the continuing improvement of services for drug users. The key to success is in genuine partnership, if we are to avoid compromising the outcome of the Prison Service's objectives and the national drug misuse strategy, Tackling Drugs to Build a Better Britain. One option is to review our efforts to recruit drug workers for prison, profiling staff in terms of qualifications and experience, and take joint action to address skills deficits and manage staff development, recruitment and retention. Who knows, this marriage may last.

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