

Worcestershire DAAT

Part 2

Young people's specialist substance misuse treatment plan 2009/10

Planning grids

Planning grid 1: Commissioning and system management

Identification of key priorities following needs assessment relating to commissioning and system management:

1. There is still no single core information and data collection system for all services. A decision needs to be reached on which system is to be used and this needs to be rolled out across the young people and adult plans and the services delivered through them, ensuring a central case management and service user index to help prevent the dangers of young people falling through the gaps.
2. Continue to improve the links with Children's services and bring the structures in line with those across the Children and Young People's Strategic Partnership
3. Review Specialist Treatment Services to ensure service specifications and delivery models are in line with Needs Assessment and models of good practice. This will ensure that services are able to meet the needs of children and young people and local drug using trends.
4. Engaging young people and service users in service development and treatment planning will ensure that services are responsive and fully engaged with user involvement principles. There is no current, structured service-user involvement from young people and their families. This needs to be a priority to ensure that their views and needs are considered in the development of service specifications and delivery

Objectives

- Objective 1.1 – Move the young people's substance misuse commissioning structure into the Children and Young People Strategic Partnership structure.
- Objective 1.2 – Develop peer support schemes and user involvement for young people and their families.
- Objective 1.3 – Implement an electronic case management system
- Objective 1.4 – Review specialist substance misuse provision

Delivery Plan:

Actions and milestones	By when	By whom
Objective 1.1 – Move the young people’s substance misuse commissioning structure into the Children and Young People Strategic Partnership Structure		
1.1a Proposal to be taken to CYPSP and agreed	March 09	NA, SR
1.1b JCG and SDG Membership and Terms of Reference aligned with other groups in CYPSP	July 09	NA, SR
1.1c Reporting and governance arrangements clarified and implemented	July 09	SR
Objective 1.2 – Develop peer support schemes and user involvement for young people and their families		
1.2a Service user action plan written following an audit of SPACE by service users to be finalised and signed off by JCG	June 09	SPACE, SMAT
1.2b Begin to implement the action plan and establish timescale for work to be undertaken	July 09	SPACE, SMAT
1.2c SPACE to work with families and facilitate the development of support groups	Sept 09	SPACE
1.2d Involve young people on the review of specialist treatment services	July 09	SMAT
1.2e Research the effectiveness and delivery models for peer support services for both substance users and YP with substance using parents/carers	Sept 09	SMAT
Objective 1.3 – Implement and electronic case management system		
1.3a Service provider agreed	April 09	SMAT, SPACE, CDT, Turning Point
1.3b Case management system installed and operational	Sept 09	SMAT, SPACE, CDT, Turning Point
Objective 1.4 – Review specialist substance misuse provision		
1.4a Papers tabled at JCG outlining review process and time-line	May 09	SR, JM

1.4b Review process to commence	May 09	JM
1.4c review process to be completed and new contracts agreed	Sept 09	JM, SPACE

Expected outcomes:

Improved data collection and the ability to generate accurate and timely local performance reports

Improved commissioning structures will assist the service review and re-contracting process.

Reviewing treatment services and involving young people and families in the development of these services provides the opportunity for Worcestershire to deliver well-designed and comprehensive treatment services that meet the needs of the young people living in the County.

Planning grid 2: Access to treatment

Identification of key priorities following needs assessment relating to access and engagement with young people’s specialist substance misuse treatment services:

1. Improve range of referral agencies and relationship between targeted and universal services
2. Referrals to treatment services by vulnerable children’s services are low despite the recognition that these young people are at risk of becoming problematic substance misusers. YOS refer most young people but it should be possible to reach some of these most vulnerable young people before they offend through other generic services
3. A screening tool has been developed that is not yet being used by all services, work needs to be done to ensure it complements screening and assessment processes of other services or agencies and that training is delivered to ensure the screening tool is used appropriately and will ensure that all young people have their substance misuse needs met within an appropriate setting.
4. Due to the geography of Worcestershire and other demographic information collected throughout the Needs Assessment it is important to ensure that service delivery models reflect this to encourage YP to accept a referral, or refer themselves, to specialist treatment service.

Objectives

2.1 Increase the range of services that are regularly referring into specialist treatment services and ensure that they are using consistent screening tools and therefore consistent referral thresholds. Services to prioritise include education welfare, health and Targeted Youth Support

2.2 Locate services in alternative venues and local communities that make them easily accessible, in line with recommendations in the Adolescent Health Strategy.

Delivery Plan:

Actions and milestones	By when	By whom
Objective 2.1 – Increase the range of services that are regularly referring into specialist treatment services and ensure that they are using consistent screening tools and therefore consistent referral thresholds. Services to prioritise include education welfare, health, housing and Targeted Youth Support		
2.1a County wide Launch of screening tool with key agencies and services working with children and young people	Sept 09	SPACE, SMAT

2.1b Delivery of training to enable practitioners to use screening tool	Dec 09	SPACE , SMAT
2.1c Actively promote treatment services to key services and professionals by attending team meetings or training events.	Ongoing	SPACE, SMAT
2.1d Meet regularly with team managers from key services to monitor screening and referrals and address any issues	Ongoing	SPACE, SMAT
2.1e Increase range of services represented on Service Development Group	April 09	JM
2.1f Receive detailed data (regarding substance use) regularly from key services for Vulnerable young people e.g. LAC, Connexions, Education Welfare	Quarterly	SMAT
Objective 2.2 – Locate services in alternative venues and local communities to make them easily accessible, in line with recommendations in the Adolescent Health Strategy		
2.2a Review hotspot data	July 09	JM
2.2b Each hotspot area must be prioritised by treatment workers for drop-ins or clinic sessions	Sept 09	SMAT, TYS, SPACE
2.2c Review current staffing levels and ensure staff are deployed in services and locations most suited to referral patterns or the needs of young people.	July 09	JM, SPACE, YOS

Expected outcomes:

Young people who are most in need of treatment services will be able to access this at a time and location that is best suited to their needs therefore improving referral numbers, range of referrers and successful outcomes from treatment

Planning grid 3: Treatment System Delivery

Identification of key priorities following needs assessment relating delivery of young people's specialist substance misuse treatment services:

1. Of the 149 young people referred to SPACE during the first half of 2008/09, 13 (8.7%) were recorded as having dual diagnosis problems. In 2007/08 this figure was at 5.3% so there has been a 50% increase. There was no record of this being asked for 34.8% though so this percentage may be even higher. Data collection needs to be improved to indicate more accurately the level of need and enable provision to be made for these young people of necessary
2. Engaging young people and service users in service development and treatment planning will ensure that services are responsive and fully engaged with user involvement principles
3. Review the treatment options currently provided and the methods of delivery to ensure that the service is responsive to local drug using trends, particularly alcohol use.

Objectives

- 3.1 Improve data collection around dual-diagnosis and improve close working arrangements between specialist treatment services and CAMHS to ensure that dual diagnosis clients receive a targeted joined up response to their needs.
- 3.2 Involve service users and their families to ensure that specialist services can continue to develop and improve in order to better meet the needs of young people.
- 3.3 Review treatment delivery models and options in the light of evidence demonstrating reductions in opiate use and increase in cannabis and hazardous and harmful alcohol use amongst young people.

Delivery Plan:

Actions and milestones	By when	By whom
Objective 3.1 – Improve data collection around dual-diagnosis and improve working arrangements between specialist treatment services and CAMHS to ensure that dual-diagnosis clients receive a targeted and joined up response to their needs		
3.1a Review assessment and data collection for Mental Health issues	July 09	SPACE, SMAT

3.1b Review joint working arrangements with CAMHS	July 09	SPACE, SMAT, CAMHS
Objective 3.2 – Involve service users and their families to ensure that specialist services can continue to develop and improve to better meet the needs of young people.		
3.2a Begin to implement the action plan and establish timescale for work to be undertaken	July 09	SPACE, SMAT
Objective 3.3 – Review treatment delivery models and options in the light of evidence demonstrating reductions in opiate use and increase in hazardous and harmful alcohol use amongst young people.		
3.3a Review treatment delivery models and options	Sept 09	SPACE, SMAT

Expected outcomes:

Services will meet the changing needs of young people in treatment services resulting in better treatment outcomes.

Planning grid 4: Leaving specialist treatment

Identification of key priorities following needs assessment relating to young people leaving specialist substance misuse treatment services:

1. Reviewing joint working arrangements between specialist drug treatment and universal services will ensure that treatment system planned discharges are optimised and care planning processes allow for relevant after care and relapse prevention.
2. Only 58% of clients left SPACE in a planned way during 2007/8 and a further 6% were referred on to other agencies

Objective

- 4.1. Continue to increase the numbers of planned discharges and onward referrals
- 4.2. Continue to build on current working arrangements with universal and other targeted services (such as Targeted Youth Support) to ensure that a joined approach throughout the treatment intervention is maintained as well as referral at discharge

Delivery Plan:

Actions and milestones	By when	By whom
Objective 4.1 – Continue work to increase the numbers of planned discharges and onward referrals		
4.1a Conduct an audit of care plans in order to ensure that all clients have a care plan completed which is realistic and appropriate, addressing deficiencies as they are identified	Oct 09	SPACE
4.1b Transition arrangements to be reviewed in conjunction with adult services	Dec 09	SPACE, SMAT, CDT, Turning Point, WCAT,

Objective 4.2 – Continue to build on current working arrangements with universal and other targeted services (such as Targeted Youth Support) to ensure that a joined approach throughout the treatment intervention is maintained as well as referral at discharge

4.2a Regular case meetings with TYS and other relevant agencies to ensure young people receive consistent and continuous support throughout and following their treatment journey

Ongoing

SPACE, TYS, SMAT,

Expected outcomes:

Less young people being re-referred into services due to holistic packages of support operating throughout their treatment journey and beyond

Planning grid 5: Non-treatment applications

(including prevention services, education and Hidden Harm services)

Identification of key priorities following needs assessment relating to commissioning and system management:

1. More work needs to be done with those young people at risk of exclusion and once they have been excluded to prevent problematic drug use or provide support. Better links need to be made locally with schools and education welfare to ensure better and more detailed recording to enable us to obtain a more accurate picture of substance use in this group.
2. It is known that substance misuse is more likely in areas of deprivation and referral data does seem to support this. Work needs to be done to refresh 'hotspot' data collated in 2007 to ensure all the data is considered when targeting resources.
3. Develop further services for families, including the children of drug using parents
4. Young people in Worcestershire are more likely to drink alcohol and use or be offered cannabis or other drugs than the national average. These levels have improved since the last surveys but are still a concern, especially considering the fact that a higher than nationally average number rate the information and advice available on drugs, alcohol, sex and smoking as not good enough
5. Alcohol related ASB and large numbers of young people drinking in public places is causing a great deal of concern in certain communities

Objectives

- 5.1 Develop closer working relationships and improved data sharing with agencies working with 'high risk' young people (such as excludees or those at risk of exclusion) to ensure that education and support can be provided with these vulnerable young people to reduce the risk of problematic substance use
- 5.2 Refresh hotspot data to ensure that resources are targeted enabling specialist services to work in partnership with targeted youth support provision (and other targeted and universal services) to deliver services to families and young people, particularly in deprived and geographically hard to reach areas.

5.3 Expanding the services available for families and the children of drug misusing parents will ensure that appropriate support is received in order to minimise the risk to physical, emotional and social wellbeing.

5.4 Improving the support and information available to young people in schools and community locations particularly about alcohol will contribute to the aim of reducing harm to health and anti social behaviour issues. Work needs to be continued in this area to ensure that responses are co-ordinated and targeted effectively.

Delivery Plan:

Actions and milestones	By when	By whom
Objective 5.1 – Develop closer working relationships and improved data sharing with agencies working with ‘high risk’ young people to ensure that education and support can be provided with these vulnerable young people to reduce the risk of problematic substance use		
5.1a Receive regular reports regarding excludees and substance misuse needs	Quarterly	SMAT, Education
5.1b Prioritise Excludees and those at risk of exclusion for prevention and early intervention initiatives	Ongoing	SPACE, Turning Point
Objective 5.2 – Refresh hotspot data to ensure that resources are targeted enabling specialist services to work in partnership with Targeted Youth Support Provision (and other targeted and universal services) to deliver services to families and young people, particularly in deprived and geographically hard to reach areas		
5.2a Refresh ‘Hotspot’ data	July 09	JM
5.2b Hold planning meetings to co-ordinate work of partner agencies and other targeted services within ‘hotspot’ areas	Sept 09	SMAT, SPACE, TYS, Turning Point , Healthy Lifestyles
Objective 5.3 – Expanding the services available for families and the children of drug misusing parents will ensure that appropriate support is received in order to minimise the risk to physical, emotional and social wellbeing		
5.3a Create management steering group for ‘inside’ out consisting of partners from both children and adult services	April 09	Turning Point, SMAT

5.3b Allocate resources to enable the development of this work	April 09	SMAT
5.3c Review service delivery model for 'Inside Out'	Oct 09	Turning Point, SMAT
5.4d Increase recording of parental status by adult services	Quarterly reports	SMAT, CDT, Turning Point
Objective 5.4 Improving the support and information available to young people in schools and community locations particularly about alcohol will contribute to the aim of reducing harm to health and anti-social behaviour issues. Work needs to be continued in this area to ensure that responses are co-ordinated effectively.		
5.4a Increase levels of drug and alcohol education delivered regularly in schools	Sept 09	Healthy Schools, SMAT
5.4b Work closely with Healthy Lifestyles team to ensure that training and resources offered to teachers and schools is sufficient	Ongoing	Health Schools, SMAT
5.5c Set priorities with Targeted Youth Support and establish initiatives in hotspot areas on Friday nights and other key times	Ongoing	SMAT, TYS

Expected outcomes:

Young People are better educated and able to make informed decisions particularly those young people who are amongst the most vulnerable.
Young People with substance using parents are better supported to reduce the risk of negative outcomes