1) NORTH YORKSHIRE LOCAL AREA AGREEMENT 2008/11 - relevant alcohol indicators

Note: The Indicators support the priorities of the North Yorkshire Sustainable Community Strategy (2008 -18), which are:

1) Access to Services; 2) Affordable Housing; 3) Alcohol; 4) Children and Young People; 5) Community Cohesion; 6) Community Safety;

7) Economy and Enterprise; 8) Older People; 9) Health and Wellbeing; 10) Environment.

SCS priority	NIS or Local Indicator *= Designated.	Designated, Local or Statutory	Brief Description	Baseline	* = Designat (Where disa included the	rovement Tar ed ggregated tar y are local tar overall County	gets are gets to	Partners Lead = * (Thematic Partnership allocation)
3, 6, 9	L 60	L	Reduce the incidence of violent crime	2005/06	2008/09	2009/10	2010/11	Police* (Safer)
			a)The number of violent crimes recorded annually	8,212	6,993	6870	6630	(Caroly
			b) The proportion of violent offences which result in Sanction Detections	51.4%		58.0%	60.0%	
3, 6, 9	L 67	L	Perceptions of anti- social behaviour.	2006/07 BVUSS	2008/09	2009/10	2010/11	CDRPs*
				16%	15%	14%	13%	(Safer)
			Craven	14%	13%	12%	11%	†
			Hambleton	9%	8%	7%	6%	
			Harrogate	12%	11%	10%	9%	
			Richmondshire	13%	12%	11%	10%	
			Ryedale	11%	10%	9%	8%	_
			Scarborough	29%	28%	27%	26%	

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SCS	NIS or Local	Designated,	Brief Descrip	otion	Baseline		rovement Tar	gets	Partners
priority	Indicator	Local or				* = Designat			
		Statutory				(Where disa	iggregated tar	gets are	Lead = *
	*=					included the	y are local tar	aets to	(Thematic
	Designated.						overall Count		Partnership
	2 co.g. accar					σαρροπιπο	oronan ooann	, ia.got/	allocation)
				Selby	21%	20%	19%	18%	anocation
				Gelby	21/0	20 /0	1970	10 /0	
3, 6, 9	NI 20*	D	Assault with	injury crime	2007/08	2008/09	2009/10	2010/11	Police*
0, 0, 3	141 20		rate.	injury crime	2007/00	2000/03	2003/10	2010/11	CDRPs
			Tale.		5.03	4.86*	4.69*	4.52*	ODITI 3
					5.05	4.00	4.09	4.52	(Cofor)
								40.00/#	(Safer)
								-10.2%*	
				Craven	4.56	4.42	4.29	4.15	
			Rates per	I I a malal a kama	0.74	0.50	0.40	(-9%)	
			1000	Hambleton	3.71	3.59	3.49	3.37	
			population	Harrogate	4.12	4.00	3.87	(-9%) 3.75	-
			1 - 1 - 1 - 1 - 1	Harrogate	4.12	4.00	3.67	(-9%)	
				Richmondshire	4.30	4.12	3.93	3.75	-
				T HOTHINGTIAGE HITC	4.00	7.12	0.50	(-13%)	
				Ryedale	3.74	3.57	3.42	3.25	-
				1				(-13%)	
				Scarborough	8.21	7.97	7.73	7.48	
								(-9%)	
				Selby	5.60	5.36	5.11	4.87	
								(-13%)	
3, 6, 9	NI 30*	D	Re-offending		15% reduction in	23%*	To be	To be	CDRPs*
			prolific and	oriority	re-offending in		negotiated	negotiated	Police
			offenders.		the PPO cohort		annually in	annually in	Probation
					The number of		light of	light of	Drug Intervention
					convictions from		previous	previous	Teams
					01 January 07 to		year data –	year data –	LCJB
					31 December 07		by Home	by Home	LO0D
					of the PPOs who		Office/GOY	Office/GOY	(Cofor)
					are on the		H/NYSP	H/NYSP	(Safer)
					scheme at 1		negotiator.	negotiator.	
					April 08		negotiator.	negotiator.	

								Annex D
SCS priority	NIS or Local Indicator	Designated, Local or	Brief Description	Baseline	Imp * = Designat	rovement Tar ed	gets	Partners
		Statutory				ggregated tar	gets are	Lead = *
	*=					y are local tar		(Thematic
	Designated.					overall County		Partnership
	Designated.				Support the	overan obani,	rargety	allocation)
							I	anocation
3, 6, 9	NI 32*	D	Repeat incidents of	2007/08	2008/09	2009/10	2010/11	CDRPs*
3, 0, 9	INIOZ		domestic violence.	PLACE	Tbc	Tbc	Tbc	טטווו ז
			domestic violence.		TDC	TDC	TDC	(Cofor)
				HOLDER				(Safer)
				Deferred until				
		_		2009				
3, 6, 9	NI 39*	D	Alcohol-harm related	2006/07	2008/09	2009/10	2010/11	PCT*
			hospital admission rates.					
				1092	1194*	1217*	1227*	(Healthier)
			(per 100,000)					
			,					
3, 6, 9	NI 41*	D	Perceptions of drunk or	2006/07	2008/09	2009/10	2010/11	CDRPs*
			rowdy behaviour as a	BVUSS				
			problem.	27%	25%*	24%*	22%*	(Safer)
			'					, ,
			Craven	24%	22%	20%	18%	1
			Hambleton	16%	15%	14%	13%	1
			Harrogate	29%	27%	25%	23%	
			Richmondshire	27%	25%	23%	21%	
			Ryedale	17%	16%	15%	14%	
			Scarborough	36%	34%	32%	30%	_
			Selby	32%	30%	28%	26%	
3, 6, 9	NI 47*	D	People killed or seriously	2007/08	2008	2009	2010	NYCC*
		_	injured in road traffic	Three year				Police
			accidents.	rolling average				Fire & Rescue
			accidente.	i siming avorage				PCT
			(based on 3vr rolling	710	692*	662*	631*	
			(based on 3yr rolling	710	092	002	U	(Safer)

								Alliex D
SCS priority	NIS or Local Indicator	Designated, Local or	Brief Description	Baseline	* = Designat			Partners
	*= Designated.	Statutory			included the	ggregated tar y are local tar overall County	gets to	Lead = * (Thematic Partnership allocation)
			averages)					
3, 6, 9	NI 115	D	The percentage of young people reporting either frequent misuse of drugs/volatile substances or alcohol or both. (Disaggregated Data – Targets to follow when agreed by NYSP.	2007/08 PLACE HOLDER Deferred until 2009	2008/09 Tbc	2009/10 Tbc	2010/11 Tbc	CDRPs* , NYCC, Police, NYYPCT (Safer)

A&E project

Although the project is now up and running in Harrogate, the progress in getting the project initiated in Scarborough and at the Friarage is slow - and it may be some time before it is known whether this will come to fruition - so there will be no indicators to put forward yet.

<u>2) CHILDREN & YOUNG PEOPLE'S PLANS 2006-2009</u> AR

Be Healthy Outcome

Extend the work to provide parents, young people with information and advice about healthy choices, including positive choices about food, sexual health, drugs and alchol.

Milestone: Year 2

Ensure that information, advice and guidance (IAG) on drugs and alcohol is accessible to parents/carers and that it meets the (anticipated) national IAG standards (Drug Action Team).

<u>Objective 1.5</u> – help children and young people to make healthy lifestyle choices and increase the healthy options available to them.

choices about the role of drugs (including tobacco and alcohol) and support to empower them to make responsible, healthier informed Key Activities - Provide Children and Young People with knowledge, skills Lead Agency: Assistant Director, Learning Youth & Skills

Milestones: year 2

and Alcohol Joint Commissioning Group. (Drug Action Team). An overarching substance misuse strategy will be developed building on the Young People's Substance Misuse Plan provided by the Young People's Drug

Ensures that the children and young people's workforce have access to tier 1 drugs and alcohol training that complies with the National Occupational Standards for Drugs and Alcohol. (Drug Action Team.)

Enjoy and Achieve Outcome

<u>Objective 3.1</u> – support the personal, social and emotional development of children and young people.

Year 3 targets = Exclusion through drug and alcohol related incidents reduced to 80 by April 2009.

Make a Positive Contribution Outcome

Objective 4.1 – encourage personal responsibility

negative risk taking behaviours (e.g. sexual behaviour, drugs, alcohol, self-Year 3 targets = Reduce the nos. of children and young people indulging in

Objective 4.4 – reducing anti-social behaviour

Milestone: Year 2

By the end of Year 2, polices, guidance and advice will have been shared with schools around risk-taking behaviour to lead to a greater understanding of exclusion and drug and alcohol use (NYCC Quality & Improvement).

Achieve Economic Wellbeing Outcome

and young people. Objective 5.1 – develop independent living skills amongst all children

Milestones – Year 2 Implementation of Drug and Alcohol Strategy and monitoring arrangements in place. (Drug Action Team).

North Yorkshire

Young people's specialist substance misuse treatment plan 2008/09

Planning grids
Date published: 27 September 2007

Planning grid 1: Commissioning and system management

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

- 1. Revised service level agreements in place for all commissioned services, including core data set for monitoring performance.
- 2. Common assessment paper work for all Tier 3 providers
- 3. 90% of young people seen in young peoples services.
- 4. NDTMS system operational in all treatment agencies
- 5. Policy and procedure agreed relating to prescribing services for young people
- 6. Initial training for Tier 2 operational staff
- 7. Data collection regarding the need for Tier 4 provision

Note: Please cut and paste the objective, actions and milestones boxes, and number objectives to allow for the full range of objectives required by the partnership plan.

Objective 1

Revised service level agreements in place for all commissioned services, including standard core data sets for monitoring performance

Actions and milestones	By when	By whom
1.1: In collaboration with the NYCC Children's commissioning group, develop service level agreements for each commissioned provider	30 th April 2008	JCM/YPJCG
1.2: Consultation with providers relating to core data collection and target setting to be included in the SLA	30 th April 2008	JCM/YPJCG

Common assessment paper work for all commissioned Tier 3 providers

Actions and milestones	By when	By whom
2.1: Consultation with all providers	30 th September 2008	JCM
2.2: Collections of all current assessment tools	30 th September 2008	JCM
2.3: Pilot of new paperwork	January to March 2009	JCM/Providers

90% of young people seen in Young people's services

Delivery Plan:

Actions and milestones	By when	By whom
3.1: NDTMS checking system in place with all treatment providers	April 2008	Data analyst & JCM
3.2: Cross checking NDTMS reports with service providers	Quarterly	Data analyst & JCM
3.4: All specialist Tier 3 provider staff to become part of the Integrated Youth support teams, remaining with their specialist parent organisation for clinical support and management.	April 2008	Specialist providers & JCM
Providing support and guidance around YP drugs and alcohol interventions with tier 2 staff at the "Hub" young peoples service bases.		
Specialist Tier 3 staff whilst being mainly based in adult service bases due to economic viability, have discreet space away from adults to see young people who choose not to be seen at the "Hub" or other young people specific venue		

Objective 4

NDTMS operational in all commissioned treatment services

Actions and milestones	By when	By whom
4.1: All clients seen by Tier 3 specialist staff are recorded on NDTMS	1 st April 2008	Specialist providers

Annex D

& data analyst

Prescribing service available to all young people in North Yorkshire

Delivery Plan:

Actions and milestones	By when	By whom
5.1: County wide treatment group incorporating a young peoples prescribing policy and protocol into their review of the county prescribing policies	1 st August 2008	County prescribing group & adult MOC officer
5.2: Policy and procedure operational in the county	1 st October	JCM
All adult prescribing services have the facility to see young people for substitute prescribing, a referral criteria and pathway is circulated to all Tier 3 staff.	2008	

Objective 6

Initial training for Tier 2 operational staff

In previous years T3 specialist staff have undertaken T2 work, this is now the responsibility of all professionals working with this client group, a skills deficit has been acknowledged

Actions and milestones	By when	By whom
6.1: None grant money is used to support a year long project to supply Tier 2 staff with drug and alcohol level 2 training	Start April 2008	JCM & contracted provider
6.2: Tender prepared with NYCC	Feb 2008	JCM & NYCC

awarded	
March 2008	

Data collection in regard to the need for Tier 4 provision

Actions and milestones	By when	By whom
7.1: Continued needs analysis specifically related to the provision of Tier 4 for young people	1 st November 2008	JCM
7.2: Collection of primary data from young people in treatment	1 st November 2008	JCM & T3 staff

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:

- Robust care pathways identified
- Increase availability of treatment places with specialist providers where demand is increased by raising the profile of service

availability

- Liaison and service provision with 90% of schools in the county by T3 staff
- Specific care pathways, referral routes with schools generally and truant and excludee populations
- Specific targeted work with the Integrated Youth Support central Hub bases
- Targets included in commissioned service providers service level agreements of:

Comprehensive assessment within 5 days of referral

Comprehensive assessment to first appointment within 5 working days

10 further working days from assessment to treatment

- Care plans in place for all those entering treatment
- Common assessment tools in place for all commissioned providers
- Specialist Tier 3 workers available to all young people in locality areas

Note: Please cut and paste the objective, actions and milestones boxes, and number objectives to allow for the full range of objectives required by the partnership plan.

Objective 1

Robust care pathways identified

Actions and milestones	By when	By whom
1.1: Young peoples treatment journey mapped across the county	31 st January 2009	JCM
1.2: Treatment and care pathways marketed/published across the county via the Young people Drug and Alcohol reference groups (expert groups)	31 st January 2009	JCM

Increase availability of treatment places with specialist providers where demand is increased by raising the profile of service availability.

Delivery Plan:

Actions and milestones	By when	By whom
2.1: Review service provision cross county, aim to not reduce provision of specialist service	31 st March 2009	JCM
2.2: Budget permitting assess the need to increase the T3 service provision in some geographical areas, to respond to the increased demand on specialist providers	31 st March 2009	JCM

Objective 3

Liaison and service provision with 90% of schools in the county by T3 staff

Actions and milestones	By when	By whom
3.1: Service provision for schools identified/described in SLA's for T3 provision	September 2008	JCM
3.2: Policies in place in all schools relating to dealing with drug and alcohol incidents including a referral pathway to specialist treatment staff	September 2008	JCM, LEA Q&I

3.3: Finances permitting, identified school liaison workers based within "hubs"	September 2008	JCM, IYS manager
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Specific care pathways, referral routes with, schools generally and truant and excludee populations

Delivery Plan:

Actions and milestones	By when	By whom
4.1: Consultation with the schools quality and improvement group at NYCC to formulate specific protocols for Tier 3 providers and schools.	August 2008	JCM NYCC Q & I
4.2: Providers to ensure schools in their geographical area have direct referral access for assessment of identified pupils and robust referral routes if assessed as not T3	August 2008	JCM, providers & NYCC Q & I
4.3: Consultation with NYCC Q & I department regarding identification of through care pathways/referral routes for truant and excluded population	August 2008	JCM NYCC Q & I
4.4: Referral protocols to T3 in place for truant and excluded population	October 2008	JCM, providers & NYCC Q & I

Objective 5

Specific targeted work with the Integrated Youth Support central Hub bases

Actions and milestones	By when	By whom
5.1: Tier 3 specialist treatment staff to form part of the integrated youth support staff at "Hub" bases in their locality	31 st March 2008	JCM
5.2: Referral pathways and criteria for referral to be developed with "Hub" teams	31 st August	JCM & IYS

	2008	manager
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Targets included in commissioned service providers - service level agreements of:

Comprehensive assessment within 5 days of referral

Comprehensive assessment to first appointment within 5 working days

10 further working days from assessment to treatment

Delivery Plan:

Actions and milestones	By when	By whom
6.1: Providers service level agreements to include targets as outlined above	31 st March 2008	JCM

Objective 7

Care plans in place for all those entering treatment

Actions and milestones	By when	By whom
7.1: Providers service level agreements have targets for number of care plans formulated	31 st March 2008	JCM
7.2: Care plan training for all provider staff working at Tier 3	31 st August 2008	JCM

Common assessment tools in place for all commissioned providers

Delivery Plan:

Actions and milestones	By when	By whom
8.1: See Objective 2 planning grid 1		

Objective 9

Specialist Tier 3 workers available to all young people in locality areas

Actions and milestones	By when	By whom
9.1: Tier 3 workers covering designated geographical areas, covering the whole span of the county	31 st May 2008	JCM
9.2: Recognition of the diverse needs in each geographical area in service providers SLA's	31 st May 2008	JCM

Planning grid 3: Treatment System Delivery

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

Common assessment tools in place for all commissioned providers

Tier 3 providers integrated into "Hubs"

Early Identification of increased demand on T3 providers

Note: Please cut and paste the objective, actions and milestones boxes, and number objectives to allow for the full range of objectives required by the partnership plan.

Objective 1

Common assessment tools in place for all commissioned providers

Actions and milestones	By when	By whom
1.1: See objective 2 planning grid 1		

Tier 3 providers integrated into "Hubs"

Delivery Plan:

Actions and milestones	By when	By whom
2.1: Tier 3 specialist treatment staff to form part of the integrated youth support staff at "Hub" bases in their locality	31 st March 2008	JCM
2.2: Referral pathways and criteria for referral to be developed with "Hub" teams	31 st August 2008	JCM & IYS manager

Objective 3

Early Identification of increased demand on T3 providers

Actions and milestones	By when	By whom
3.1: Monitoring meetings with providers to look at the waiting times and waiting lists for T3	Quarterly	JCM
3.2: Evaluation at young peoples joint commissioning group re allocation of funding to meet need	Quarterly	JCM

Planning grid 4: Leaving specialist treatment

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

80% of service users leave treatment in a planned way

Transitional arrangement policy and procedure in place

Note: Please cut and paste the objective, actions and milestones boxes, and number objectives to allow for the full range of objectives required by the partnership plan.

Objective 1

80% of service users leave treatment in a planned way

Delivery Plan:

Actions and milestones	By when	By whom
1.1: Service level agreements to include targets relating to exits from treatment	31 st March 2008	JCM
1.2: Definition of planned and unplanned exit to disseminated to providers and operational staff briefed	1 st August 2008	JCM

Objective 2

Transitional arrangement policy and procedure in place

Actions and milestones	By when	By whom
2.1: Consultation with adult commissioning group to formulate a transitional procedure for Young people leaving young people services to adult services	31 st March 2009	JCM, MOC officer
2.2: Protocol and policy in place across the county regarding transitional arrangements	31 st March 2009	JCM, MOC officer

Young people's specialist substance misuse treatment plan 2008/09

Signed: Date:	Chair of the Community Safety Partnership/Drug Action Team
Signed: Date:	Director of Children's Services