

Young People's Working Group

22 July 2009

Report from the Assistant Director, Partnerships and Early Intervention

Young People's Substance Misuse

Summary

1. This report provides an update of the work and activities overseen by the Young People's Joint Commissioning Group (YPSMJCG) for the prevention and treatment of young people's substance misuse in the city. It is for Members' information and to prompt debate.

Background

- Substance misuse work in local authorities is governed by a Memorandum of Understanding between the Department for Children, Schools and Families (DCSF) and the National Treatment Agency (NTA) which sets out the vision for young people who need access to specialist substance misuse treatment provision. This Memorandum of Understanding highlights that local delivery of young people's specialist substance misuse treatment should be integrated into broader children's services provision, with planning and commissioning becoming an integral part of strategic Children and Young People's Plans in due course. These arrangements and guidance throughout apply only to young people under the age of 18.
- 3. The delivery strategy for Public Service Agreement (PSA) 14 identifies the performance assurance arrangements that will apply to young people's specialist substance misuse services and indicates that these arrangements will be supported by the following main delivery levers:
 - the effective treatment indicator in PSA 25 Reduce the harm caused by alcohol and drugs, which also applies to those aged under 18;
 - performance management of Local Strategic Partnerships by Government Offices against targets negotiated in Local Area Agreements;
 - performance management of Primary Care Trusts (PCTs) by Strategic Health Authorities against indicators in local PCT delivery plans;
 - assurance of local drug partnership plans via process of annual agreements and quarterly reviews by the National Treatment Agency for Substance Misuse (NTA);

- the publication of monthly performance management information through the National Drug Treatment Monitoring System (NDTMS);
- the provision of dedicated resource via a joint Department of Health and Ministry of Justice pooled treatment budget; and,
- independent assessment and review by the Care Quality Commission and the Audit Commission.
- 4. At a regional level the NTA works with Children and Learners' Divisions in Government Office, regional Youth Justice Board, regional CAMHS, and Strategic Health Authority colleagues to develop processes to support improvement of young people's specialist substance misuse services. These arrangements are designed within the context of both the Children's Plan and the Youth Alcohol Action Plan which highlight the cross cutting need for children's partnerships "to improve the quality and coverage of specialist drug treatment for the young people who experience the most serious harm from drugs, building on progress to date". In terms of measuring performance on local authorities, the NTA is committed to working in line with the new local performance framework outlined in the 2006 Local Government White Paper, Strong and Prosperous Communities which includes the review and refresh of Local Area Agreements where appropriate.
- 5. Local Authorities are required to work with partner agencies to ensure that appropriate arrangements for securing services to young people are in place. A Young People's Substance Misuse Joint Commissioning Group (YPSMJCG) was established to oversee the development of coordinated responses; distribute resources allocated by the Department of Health, the Home Office and DCSF; monitor and evaluate the outcomes of commissioned services; and produce an Annual Treatment Plan following an assessment of need.
- 6. Membership of the YPSMJCG include representatives from the Council's Young People's Services, Children and Families, Youth Offending Team, Housing and Adult Social Services, Children's Trust Unit and Schools' Development; North Yorkshire and York Drug and Alcohol Action Team (DAAT); Children and Adolescent Mental Health Services (CAMHS); North Yorkshire Police and Safer York Partnership; York College; and CRI (Crime Reduction Initiative).

Local Developments

- 7. The YPSMJCG is committed to achieving comprehensive and integrated substance misuse services for young people in York and to do this will:
 - Maintain a high quality school and college based drugs education programme.
 - Ensure that the whole community has access to advice and information on substance misuse and services.
 - Develop access to information, advice and support for parents/carers and families of young people who misuse substances.

- Ensure all young people are assessed within five days of being referred to specialist treatment services. This target has been established by the National Treatment Agency (NTA).
- Ensure the views of young people (and where appropriate their parents or carers) are used to inform the design, delivery and evaluation of services.
- Ensure that vulnerable young people are asked about their substance misuse using the initial assessment form; this will form an annex to the Common Assessment Framework (CAF).
- Ensure that there are effective systems in place to collect and collate data on substance use and take up of services.
- Develop a programme of training and consultation with specialist workers in order to equip the children and young people's workforce with the appropriate level of skills to respond to substance misuse issues with young people.
- 8. A referral route pathway chart has been produced for clear intervention guidance to schools and youth groups. Practitioners are fully aware of the protocols and procedures to enable them to address specific issues at the appropriate tiers.
- 9. The Partnership fund is contributes to six work streams:
 - Youth Offending Team (YOT) Commissioned service (ring fenced) to make assessments of all young offenders with identified substance misuse issues. Tier 2/3 interventions. Relevant referrals to other agencies. Outreach service where appropriate.
 - York College Commissioned service to provide substance misuse education programme through the tutorial curriculum. Targeted at all students aged 14-18.
 - First Base Commissioned service to provide a tier 2/3-specialist support service for young people aged 18 years and under living in the City of York, and, where appropriate, their parents or carers.
 - Workforce training A progressive programme of substance misuse awareness training for the whole children and young people's workforce.
 - Annual needs assessment and Treatment Plan A requirement of the National Treatment Agency.
 - Annual Conference/ Planning Day Brings together a range of professionals to gain knowledge of developments in the substance misuse agenda and to discuss future plans and direction.
- 10. All this activity contributes to *Being Healthy* and *Staying Safe* sections of the Children and Young People's Plan. It also impacts on the LAA priority NI 115 the % of young people who admit to frequent misuse of drugs/volatile substances or alcohol (measured via the *TellUs* survey).

Numbers

- 11. Performance data from the TellUs survey has not worked well as a reliable indicator because of limitations with its completion. For example, the last survey was mainly completed by younger primary school children. However, our local needs assessment indicates that there could be 110 young people in year 10 requiring substance misuse related intervention, with up to 238 of the same cohort for alcohol intervention.
- 12. The annual Treatment Plan is subject to a biannual self-assessment and an annual review undertaken by the NTA.

Progress: what's working well

- 13. The comprehensive Needs Assessment completed in February has provided clear direction for improvement, and a set of priorities, which are outlined in the Annual Treatment Plan.
- 14. In summary the key findings of the Needs Assessment are:
 - 62% of young people referred disclosed "poly drug" use.
 - Secondary substances are more likely to be Cannabis (27%) and Alcohol (34%).
 - 46% of young people referred into First Base were classified as vulnerable due to experiencing problems with their education (e.g. school exclusion, non- attending at school, NEET) This reflects the high referral rate from Children's Services (which includes Connexions) and Schools.
 - 32% of young people referred into First Base were classified as vulnerable due to experiencing problems at home (20% family breakdown and 13% parental substance use); 14% of young people referred had been asked to leave the family home and were classed as homeless at the point of referral.
 - The youngest person referred into the service was 12yrs old.
 - Young people are more likely to be referred to the service aged 15yrs old (34%) and 17yrs old (24%).
 - Out of the 71 referrals made to First Base between April 07 and July 08 28% were assessed as requiring specialist Tier 3 intervention (aged 16yrs+).
 - Half of the Tier 3 clients reported Alcohol to be their primary drug, with 30% of them reporting Cannabis as a primary substance.
 - Use of Class A substances was limited to Cocaine and Ecstasy with 15% of Tier 3 clients reporting these substances as their primary drug at referral.
 - Females are more likely to be assessed as requiring specialist treatment support than males (70% of Tier 3 clients within this period were female).
 - There has been a rise in problematic alcohol use in young females within the City (64% of Tier 3 females within this period reported alcohol use as their primary substance)
 - 83% of Tier 3 clients disclosed poly drug use (secondary substance).
 - Half of the Tier 3 clients admitted to using 3 or more substances.

- Injecting remains rare within the treatment population of young people within York, which is a welcome way in which we differ from many other large conurbations in Yorkshire. Only 5% of young people within this period were known to have an IV history. This was associated with steroid usage only.
- Incidences of young people being previously treated within treatment were low with 15% of Tier 3 clients within this period previously being treated within Tier 3/4 provision.
- Young people requiring specialist treatment were most likely to live in the Fishergate, Fulford, Osbaldwick or Tang Hall postcode ward (30%).
- The majority of Tier 3 clients were engaged in "psycho social structured interventions". This includes assessment and defined treatment planning alongside treatment goals with regular reviews (75% of Tier 3 clients within this period).
- 84% of those discharged from treatment within this period did so in a planned manner, with 95% of these planned discharges occurring as treatment was completed.
- 15. The following key priorities have been identified through the Needs Assessment and will support the delivery of PSA 14:
 - The development of an integrated commissioning strategy led by Children's Trust, which will ensure a collaborative approach to addressing all types of risky behaviour by young people.
 - Ensure that appropriate communication and information sharing is established between York Hospital and First Base with appropriate signposting and referral routes established.
 - Consider the viability of a young people's prescribing and needle exchange service.
 - Promotion of children's substance misuse services to adult providers to ensure referrals and information sharing in relation to children affected by adult substance misuse takes place.
 - Review of drug and alcohol education within all schools.
 - Early identification of families likely to be affected by substance misuse including 'hidden harm' to children and siblings.
 - NDTMS data needs to include more information about children and young people in relation to adult interventions. Ensure commissioned services complete all data returns in a timely and accurate manner (NDTMS and quarterly monitoring).
 - Ensure that arrangements for clinical governance and auditing align with national policy and good practice guidelines.
- 16. All services are working well with very competent staff collaborating effectively with partner agencies. There is excellent involvement in partnership consultative

arrangements. The training programme is well supported by staff from a wide range of children and young people's services.

Challenges: what's not working so well

- 17. Financial resources are limited although numbers of young people are low compared with other local authorities.
- 18. There is a greater focus on treatment rather than prevention. Protocols and communication between York Hospital A & E Department and First Base is weak. Some difficulties experienced in engaging all young people in a planned exit programme and the transition to Adult Services requires improvement. The treatment and support for care leavers remains a priority.

Financial Resources

19. The Young People's Substance Misuse Partnership Grant 2009/10 is distributed as follows:

Scheme	Total Budget (£)
Commissioning and System Management	4,000
York College	26,000
Youth Offending Team	32,000
First Base	73,500
Conference Planning	500
Training Administration - CRI	2,500
Training Costs	1,500
Treatment/Local Responses	1,315
Total Budgeted Expenditure	£141,315

2009/10 Grant Allocation -£141,315

20. A grant of £23,000 from CAMHS is assigned to Castlegate for counselling services, and a further £26,000 from the Connexions grant is used for the provision of an alcohol worker at First Base (CRI)

Consultation

21. Consultation with young people and specialist workers is a regular feature of our work, as mentioned at paragraph 7 above.

Options and Analysis

(This report is for information.)

Corporate Priorities

22. This work will help to 'Improve the life chances of the most disadvantaged and disaffected children, young people and families in the city '.

Implications

(This report is for information and has no specific financial, HR, equalities, legal, crime and disorder or IT implications.)

Risk Management

(There are no significant risks inherent in this report.)

Recommendations

- 23. The Young People's Working Group is asked to:
 - receive the report for information; and
 - make comment on the strategy and direction of the work.

Reason: to inform future strategic work on substance misuse services for young people in York

Contact Details

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Wards Affected: List wards or tick box to indicate all

For further information please contact the author of the report

Background Papers: None