

**ORIGINATOR: SHARON JARRETT
PUBLIC HEALTH/
YOUTH OFFENDING
SERVICE**

PAPER NO: AP14/36

SUBMITTED TO: Accountability and Performance Panel 18 June 2014

**SUBJECT: Performance Monitoring against the Young People specialist
substance misuse service – outreach and criminal justice
elements.**

SUMMARY:

The Police and Crime Commissioner funds a proportion of the budget for both the Criminal Justice and Outreach elements of the Young People's Specialist Substance Misuse Service.

For previous reports we have been able to break down performance against the two elements using data supplied by Public Health England, but this has not been possible for this report as Public Health England have not supplied their reports at this level for Q3 and Q4, only producing an end of year summary 2013/14 for the whole service.

This report is therefore for the whole Young People Specialist Substance Misuse Service for 2013-14

RECOMMENDATION:

The Panel is recommended to:

Note the information within this report and endorse the necessity of having a specialist substance misuse service for young people

Note the efforts to improve planned exits by the Service

DETAIL OF THE SUBMISSION

1. KEY ISSUES AND PROGRESS:

The data shown in the table below is taken from the National Data Treatment Monitoring System (NDTMS) end of year Executive Summary Report, 2013-14. The service provider (The Matthew Project) submits data to NDTMS on a monthly basis in accordance with strict quality control and nationally set criteria, which allows for validation and benchmarking. Q1 and Q2 data has been included in the table below for comparison, but as can be seen not all the fields have been reported against in the Executive Summary.

	Number in treatment year to date	Number of new referrals	Received a care plan within 2 weeks	Received first intervention in less than 3 weeks	Planned exits	Planned exits who met goals agreed on care plan at exit
Q1	65	19	95%	96%	66%	100%
Q2	98	34	100%	92%	65%	95%
Q3	Not reported	73	Not reported	81%	61%	Not reported
Q4	180			89%	62%	
Year Summary	180	126		89.5% average	63.5% average	

Sources of referral

	Children & Family Services	Education services	Health & Mental health services	Substance misuse services	Family, friends and self	Youth Justice services	Other
Q3	14%	26%	4%	2%	9%	41%	3%
Q4	14%	27%	5%	2%	9%	41%	2%

The numbers of young people receiving specialist interventions (in treatment) has dropped by 5% compared with the previous year, 2012-13. This reflects the national downward trend.

The target for planned exits is 79% to be in line with national achievement. It is noted that the service did not achieve this through the year and in fact the 2013-14 year average is lower at 63.5% to the 2012-13 average of 73%. We have worked with the provider to address this throughout the year. For instance, from analysis of referrals, engagement with the service and feedback from young people, it is evident that a number of those young people who do not have a planned exit were not sufficiently informed and prepared for engagement prior to referral. They still then benefit from the assessment process with the specialist substance misuse worker but do not always wish to follow up at that point. The Service has changed the process for assessment to reflect this, ensuring that all young people receive information, advice and brief interventions relating to their substance misuse

and lifestyle but only developing a full plan of intervention if it is evident that the young person is ready to engage. The Service has also worked to educate referrers to prepare the young person better and, as previously, liaise with the referrer and other professionals involved to ensure appropriate support is available for the young person. This makes best use of staff time and encourages other services to work more collaboratively with the Service.

It is also acknowledged that the service has experienced difficulties such as staff vacancies during the year which has meant less capacity to follow up young people who have completed their support/treatment goals but do not attend for their last appointment, which then has to be recorded as an unplanned discharge. Where possible, in this situation, the worker endeavours to telephone contact the young person directly to ensure their well being and draw their engagement with the service to a managed conclusion, i.e. a planned discharge.

The drop in percentage of planned exits is disappointing but it is also worth noting the small numbers of YP in the service which manifests as a larger change in the percentage in relation to a small change in number.

We are unable as yet to give a validated measure demonstrating the behaviour change in the young people completing treatment – although completion of their agreed goals does in part suggest that this has taken place, given that goals are focussed on reducing substance misuse, reducing links to offending behaviour, re-engaging with positive activities, learning and relationships.

The average percentage for the year of young people receiving the first intervention within three weeks of assessment is up 12% from the average in 2012-13.

86% of young people in treatment have been aged 15 years and over, with 34 individuals aged 18 years or over. The service works with over 18s if it is assessed that they are not ready to engage with an adult service provider but are willing to engage with the young Peoples Service and would clearly benefit from doing so.

The substance of use by young people engaged with the service continues to be cannabis (87%) and alcohol (54%). This may be as their only use, combination as cannabis and alcohol or with another substance. No young people were receiving specialist interventions for opiate use or required pharmacological interventions. These findings reflect the national breakdown of young people substance misuse.

Unsurprisingly perhaps, the young people engaging with the Service frequently have one or more other vulnerabilities – as noted in the table below. The Service works with other services for children, young people and families to ensure integrated and co-ordinated support is given.

The table gives a comparison with the national percentage breakdown, and although consideration must be given to the small numbers in Suffolk compared to national (5,894 in treatment nationally in Q4) it is worth noting the higher percentages of YP across many of the categories of vulnerability.

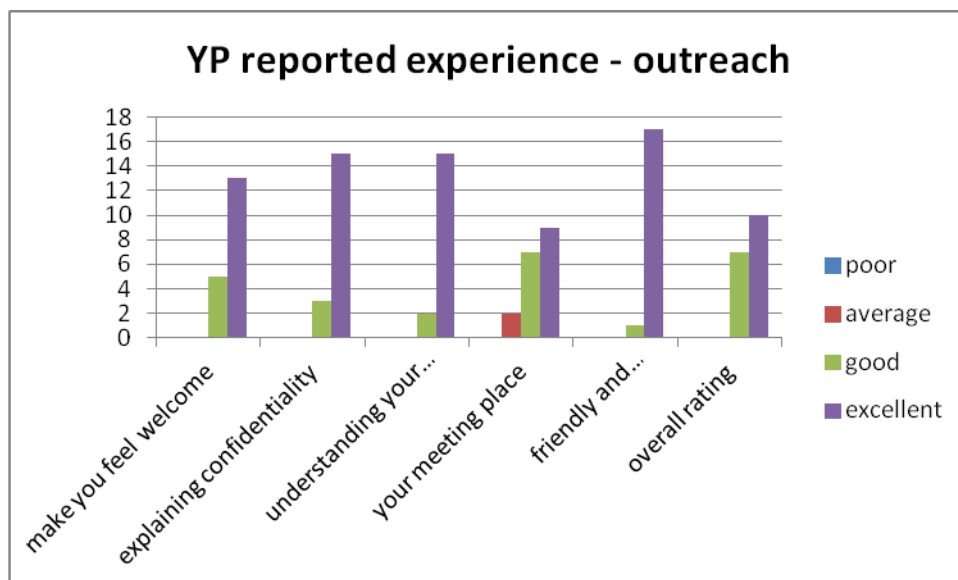
Wider vulnerabilities of young people engaged with the Service in Q4

Vulnerability	Number	%	National %
Looked After Child	4/52	8%	10%
Child in Need	5/52	10%	5%
Domestic Abuse	14/52	27%	17%
Mental Health problem	11/52	21%	14%
Sexual Exploitation	1/52	2%	4%
Self Harm	15/52	29%	16%

NEET	3/52	6%	17%
Housing problems	3/52	6%	2%
Parental status/pregnant	1/52	2%	2%
Child Protection Plan	4/52	8%	5%
Antisocial behaviour / criminal act	14/52	27%	20%
Affected by others' substance misuse	7/52	13%	14%

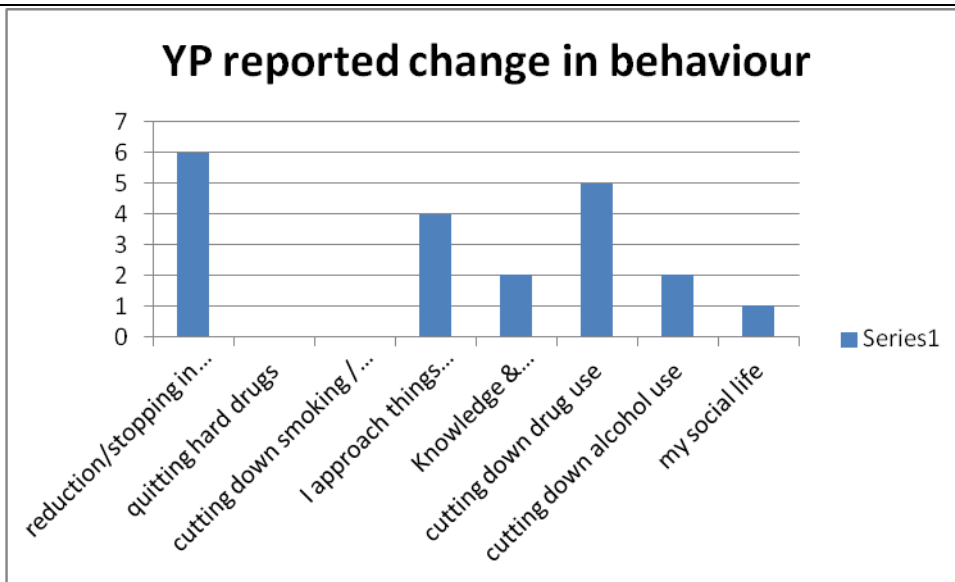
The new outcomes tool for use by substance misuse services working with young people has now been implemented but as yet we have not received any reports from the data submitted to NDTMS. The substance misuse service does, however, ask all young people it works with to complete an evaluation form on exit. This is purely voluntary for the young person and only a small proportion of young people do so, but it does give some indication of the outcomes achieved by the Service. The following charts give a breakdown of the responses received in 2013 up to December.

Outreach Element of Service



Understanding your needs
 Friendly and approachable

Total number of forms - 18



Reduction / stopping use of cannabis
 Cutting down smoking/stopped smoking
 I approach things differently
 Knowledge and understanding about drugs

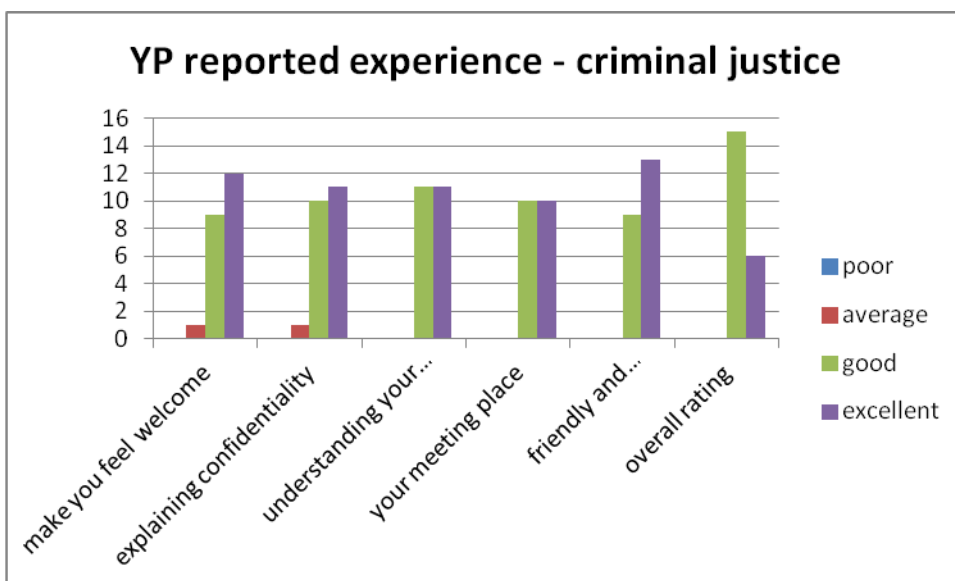
Total number of forms - 18

From the responses of the young people worked with by an outreach substance misuse worker, who completed a form it can be seen that:

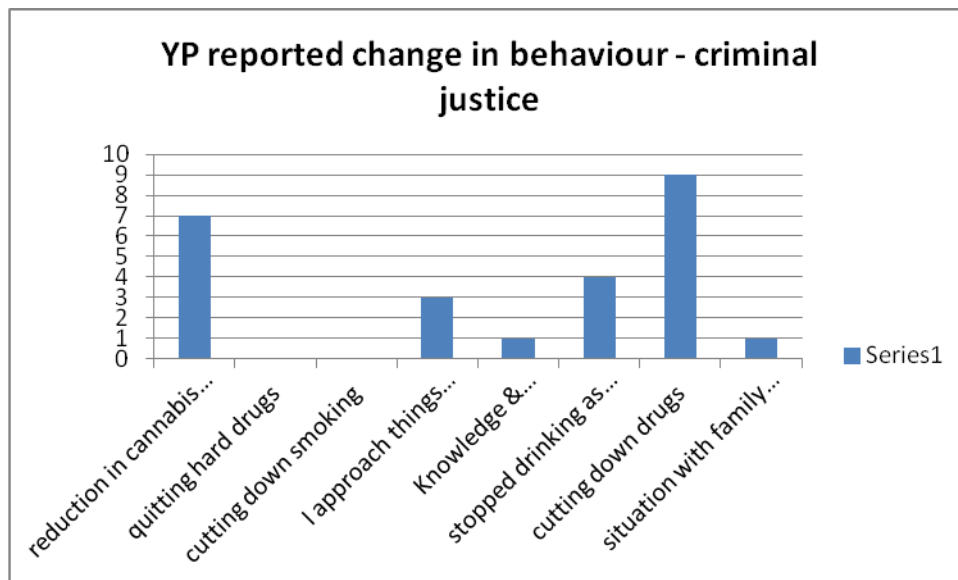
- the Service is well thought of with quality ratings being almost 100% good or excellent
- the elements of the service found to be most helpful were having someone to talk to and talking with someone who understood about drugs and alcohol and the information received about drugs and alcohol and consequences of use.
- the changes in behaviour in those young people include cutting down on smoking, reduction in cannabis use, other drugs and alcohol and an increase in their understanding about drugs and alcohol.

These findings are reflected by the responses given by young people engaged with the criminal justice element of the Service.

Criminal Justice element of Service



Total number of forms - 22



Reduction in cannabis use
 I approach things differently
 Knowledge and understanding about drugs
 Situation with family improved

Total number of forms - 22

The Service and commissioner also receive feedback from professionals as to their experience of making a referral and joint working. This feedback has always been positive.

In addition to working with young people assessed as requiring specialist interventions, the outreach service delivers targeted interventions to young people at risk of substance misuse. This is frequently in a group setting and again feedback is extremely positive, from both the young people and the other practitioners involved. Young people report that their knowledge of drugs and alcohol and their understanding of the consequences of use has increased and that they would recommend the Service to friends.

2. FINANCIAL IMPLICATIONS:

The Service is being re-tendered this year ready for a new contract start date of April 2015. The young people element will become part of a fully integrated, all age, drug and alcohol service for Suffolk but with full recognition of the specific treatment and support needs of young people. Public Health have committed to maintaining the current level of funding for the initial year of the new contract but this will be subject to cost pressures in future years.

3. OTHER IMPLICATIONS AND RISKS:

Given the rural nature of the county and the feedback from young people that they are more likely to engage with a Service if it is available in their own locality and at a time convenient to their educational and family needs, it is important to have sufficient capacity within the service to provide this degree of flexibility. We have worked closely with the current provider to make most efficient use of staff skills and capacity but this may be compromised if the amount of finance available is reduced in coming years. It is hoped however, that integrating young people's services with adult's services will give the opportunity for more flexible approaches and collaborative family work.

ORIGINATOR CHECKLIST (MUST BE COMPLETED)	PLEASE STATE 'YES' OR 'NO'
Has legal advice been sought on this submission?	NO
Has the PCC's Chief Finance Officer been consulted?	NO
Have equality, diversity and human rights implications been considered including equality analysis, as appropriate?	YES – within service specification and contract review
Have human resource implications been considered?	YES - within service specification and contract review
Is the recommendation consistent with the objectives in the Police and Crime Plan?	YES
Has consultation been undertaken with people or agencies likely to be affected by the recommendation?	YES
Has communications advice been sought on areas of likely media interest and how they might be managed?	YES – through Public Health and SCC communications
Have all relevant ethical factors been taken into consideration in developing this submission?	YES – within service specification and contract review

In relation to the above, please ensure that all relevant issues have been highlighted in the 'other implications and risks' section of the submission.