

Hertfordshire DAAT

Young People's Substance Misuse Annual Plan

2009 – 2010

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**TACKLING
DRUGS
CHANGING
LIVES**



Introduction

The new National Drug Strategy 'Drugs: Protecting Families and Communities' 2008 - 2018 aims to restrict the supply of illegal drugs and reduce the demand for them. It focuses on protecting families and strengthening communities. The Drug Strategy is a cross-Government programme of policies and interventions that concentrate on the most dangerous drugs, the most damaged communities and problematic drug users.

The Strategy comprises four strands of work:

- Protecting communities through tackling drug supply, drug-related crime and anti-social behaviour
- Preventing harm to children, young people and families affected by drug misuse
- Delivering new approaches to drug treatment and social re-integration
- Public information campaigns, communications and community engagement.

Hertfordshire Young People's Substance Misuse Plan

Hertfordshire Young People's Substance Misuse Plan 2009 – 2010 details the priorities for young people as part of the overall strategy for crime and drugs in Hertfordshire. The Plan covers all substances, including alcohol, tobacco, prescribed and illegal drugs and anti-social behaviour related to these. This acknowledges that young people take risks with a wide range of substances.

In Hertfordshire, a harm reduction approach is used in responding to identified substance related issues amongst young people and integrated care plans are drawn up as part of the Common Assessment Framework (CAF) process including drug screening where necessary. Drug and alcohol workers are members of District multi-agency teams and will be involved in a team around an individual young person, where drugs or alcohol misuse have been identified as a main presenting issue.

Drug and/or alcohol misuse does not occur in isolation. It is often a symptom of or associated with other problems such as emotional and mental health issues, youth offending, persistent absence and exclusion from school, family problems or living in communities with high incidence of crime.

The Young People's Substance Misuse Plan covers activity across the County of Hertfordshire for children and young people aged 0-19 years. Priorities include strategic developments that will impact on every District and community and also projects or services that will be targeted at specific areas of Hertfordshire; these projects or services may be targeted as the result of an identified need or as a pilot activity to test a particular model or approach to service delivery.

The priorities are the result of an extensive piece of consultation and needs assessment conducted over the period October 2008 to January 2009 with a wide range of stakeholders. The priorities are also determined by the results of the Health Related Behaviour Survey which is commissioned every two years by the Young People's Substance Misuse Joint Commissioning Group. The survey was developed by the Schools Health Education Unit at Exeter University and provides Hertfordshire partnerships with valuable data on young people's attitudes and behaviour in relation to a range of health and safety issues, including drugs and alcohol. The survey was completed in the autumn term 2008 by over 10500 children and young people in years 5, 6, 8 and 10 in schools across Hertfordshire.

The draft Plan has been scrutinised by partner agencies through the consultation phase and has been formally agreed by the Joint Commissioning Group which performs the function of the 'expert' group for young people's substance misuse.

Responsibility for delivery of the activity outlined in this plan rests with partner agencies and District-based Children's Trust Partnerships and Crime and Disorder Reduction Partnerships. Some of the activity is centrally driven or commissioned by the Joint Commissioning Group and managed by the Young People's Substance Misuse and Crime Reduction Team within Children Schools and Families (CSF). Responsibility for commissioning and system management rests with the Joint Commissioning Group, through the Head of Young People's Substance Misuse and Crime Reduction Services.

The plan is focused on priorities for development rather than attempting to cover all activity managed or commissioned in relation to substance misuse. A number of cross-cutting themes underpin the priorities in this year's plan and are to be considered when developing local action plans:

- Involving children, young people and families in developing services
- Diversity and equality
- Improving data collection, quality and reporting

Alcohol remains a priority for 2009-2010. All young people and their families should receive information and education about the effects of alcohol on young people. This can be delivered through schools and colleges and other education settings but also through the wider community. Alcohol fuelled anti-social behaviour is a concern highlighted in most District Community Safety Plans and although the number of young people who report drinking alcohol is reducing, a small percentage of young people regularly binge drinking requires appropriate responses in order to keep them safe and on the right track. Crime and Disorder Reduction Partnerships will be developing actions around these issues in their local alcohol reduction plans.

The Department for Children, Schools and Families (DCSF) has published authoritative guidance (Draft Guidance on the Consumption of Alcohol by Children and Young People from the Chief Medical Officers of England, Wales and Northern Ireland, January 2009) about what is and what is not safe and sensible drinking, based on evidence from the UK and abroad. The Young People's Substance Misuse and Crime Reduction Team will support the consultation phase and drive forward implementation of the recommendations locally.

Context

Reducing drug use by young people, particularly the most vulnerable, is central to the Government's Drug Strategy. 'Drugs: Protecting families and communities'. Every Child Matters: Change for Children' sets out the outcomes for all children and young people:

- **Being Healthy**
- **Staying Safe**
- **Enjoying and Achieving**
- **Making a Positive Contribution**
- **Achieving Economic Wellbeing**

Choosing not to take drugs is an aim under the 'being healthy' outcome.

'The Every Child Matters: Change for Children programme is an opportunity to enhance the prevention of substance misuse by children and young people as part of a holistic multi-agency outcomes-focused approach. Drugs are closely linked to poor outcomes among young people. Children's services already know many of those at greatest risk.' *Every Child Matters: Change for Children: Young People and Drugs, 2005*

The above document outlined a joint Government approach to the development of universal, targeted and specialist services to prevent harm from drugs and alcohol and to ensure that all children and young people are able to reach their potential. The approach included:

- Strengthening links between the National Drug Strategy and the Every Child Matters programme nationally and locally.
- More focus on prevention and early intervention with those most at risk, with substance misuse considered as part of the Common Assessment Framework process and care planning by all agencies, including schools.
- Building service and workforce capacity. Developing a range of universal, targeted and specialist provision to meet local needs.

Under the Children Act 2004, there is a clear obligation for all services and organisations to work together to achieve these outcomes.

The Young People's Substance Misuse Partnership.

The Young People's Substance Misuse Partnership has been well established since 2001 and is a good example of agencies co-operating and pooling resources to deliver better services based on the needs of children and young people. Hertfordshire has a robust joint commissioning arrangement for young people's substance misuse that has been in place since 2001.

The Young People's Substance Misuse Joint Commissioning Group is accountable both to the Drugs Executive Group (formerly known as the Drug and Alcohol Action Group or DAAT), a sub-group of the Safer and Stronger Performance Group, which is itself part of the reporting structure for the Local Area Agreement and also to the Hertfordshire Children's Trust Partnership.

Membership of the Joint Commissioning Group includes senior decision makers from Youth Connexions, Youth Justice Service, Police, Primary Care Trust, Child and Adolescent Mental Health Service, Children, Schools and Families and Adult Care Services.

The Young People's Substance Misuse Joint Commissioning Group is responsible for the strategic direction and leadership of service development and for the pooled resources to support delivery.

Its aims are:

- To prevent today's young people from becoming tomorrow's drug users
- To develop strategy and innovative practice across universal, targeted and specialist services.

The strategic objectives of the Partnership are to:

- Provide guidance and information to improve the quality and effectiveness of drug education that meets the needs of children, young people and families and the children's workforce.
- Reduce risk and prevent the harm created by substance misuse, particularly among the most at-risk children, young people and families.
- Intervene early to ensure that, where young people do have drug or alcohol problems, they receive the effective treatment and support they need.

The **Young People's Substance Misuse and Crime Reduction Services** team is responsible for the development and co-ordination of the delivery of the strategic plan.

Targets

Hertfordshire's Children's Trust Partnership has prioritised two themes for its Children and Young People Plan 2009-2010:

1. Safeguarding all children and young people
2. Narrowing the gap between vulnerable children and young people and the majority of children and young people in the County

The Children and Young People's Plan identifies twelve priorities under these themes:

- Children and young people are safe from abuse and neglect
- Children and young people achieve their full potential whilst in and moving on from care
- Children and young people are confident to respond to bullying
- Children and young people's emotional wellbeing and mental health is well supported
- Children and young people have a healthy weight
- Vulnerable under fives are well prepared for life
- Vulnerable children and young people achieve as well as others
- Children and young people with learning difficulties and disabilities are empowered to reach their full potential
- Young people get a wide range of opportunities to learn
- Children and young people make a positive contribution to decisions about services
- Child Poverty
- Keeping young people on the right track

Substance misuse is often a factor identified as a contributor to poor outcomes for young people. The work of the Young People's Substance Misuse Partnership addresses most of the Children and Young People's Plan priorities identified above.

The new local performance framework published in November 2007 includes a National Indicator set that reflects the Government's priorities for delivery by local government and its partners over the next three years.

A number of the performance measures identified in the Indicator Set could include substance misuse but it has been specifically identified in:

PSA 14: Increase the number of children and young people on the path to success (indicator NI15 Substance misuse by young people) and

PSA 25: Reduce the harm caused by alcohol and drugs.

NI 40 Drug users in effective treatment.

Hertfordshire Children's Trust Partnership has prioritised the delivery of the PSA 14 strands in the Children and Young People's Plan 2009-2010 under the priority heading 'Keeping young people on the right track'.

Hertfordshire's treatment and intervention services for young people are performance managed by the National Treatment Agency. Some of the targets that Hertfordshire is measured against include:

- Young people as a proportion of the overall treatment population – target 14%
- 90% of young people in young people's services as opposed to adult services
- 100% of waiting times 2 weeks and under

- 80% of clients leaving service as planned discharge
- 20% of clients referred by children, schools and families, Social Care, LAC and education
- 100% of individuals completing a general health care assessment

Baseline Information

“33% of secondary school pupils in Hertfordshire said they had drunk alcohol in the 7 days before the survey”

“20% of secondary pupils in Hertfordshire said they had drunk alcohol at home in the last 7 days”

Health Related Behaviour Survey 2008

The number of fixed term exclusions for drug and alcohol related incidents had decreased from 292 in 2006/07 to 125 in 2008/09

Hertfordshire County Council 2008

During 2007/08 in Hertfordshire 134 young people received a specialist intervention from A-DASH for drug and alcohol problems. The most popular primary drugs of choice for young people in Hertfordshire remain cannabis and alcohol. This, along with what young people reported via the Health Related Behaviour Survey, reinforces the need to maintain our focus on cannabis and alcohol with a particular emphasis on the impact families and parents have on young people’s alcohol use. The Needs Assessment refresh completed in January 2009 identified an increase in powder cocaine use as a secondary drug of choice. To address this increase, the Hertfordshire Drug Education Forum will identify further opportunities for awareness raising and education and support key messages and resources from the national 'Pablo' cocaine campaign from FRANK.

A-DASH will continue to monitor use of cocaine and will provide tailored packages of care for young people with an identified need. Hertfordshire’s strategy for meeting the needs of problematic young drug users who require a Tier 4 intervention is to place young people in treatment foster care. 4 specialist foster care families have been recruited and trained in 2008 -09 and a Foster care Toolkit developed to support them. 1 young person is currently successfully receiving care in a foster placement, with intensive support from A-DASH. Residential beds will be spot purchased for detoxification or rehabilitation where foster care in the community is not judged to be appropriate.

The A-DASH Consultant Psychiatrist undertakes all prescribing. A referral to a GP may be made where a physical health concern is identified.

Monitoring and review

The Young People's Substance Misuse Plan is reviewed 6 monthly with reports to the Joint Commissioning Group and the National Treatment Agency.

The Plan informs the team plans of:

- Young People's Substance Misuse and Crime Reduction Team
- A-DASH (Adolescent Drug and Alcohol Service)
- Health and Wellbeing Team in Schools Standards and Effectiveness
- Youth Connexions
- Youth Justice Service

Funding

The Joint Commissioning Group agrees the priorities contained in the Plan and monitors its implementation. It has a budget of around £900,000 to resource the activity. The funding pays for services for young people that include universal drug education, targeted prevention for the most vulnerable young people and young people's treatment services. Approximately two thirds of the total pooled budget is committed to treatment services.

What can you do to contribute?

- Ensure that substance misuse issues are integrated into appropriate strategies and local service delivery plans.
- Engage with a wide range of partners, but especially children and young people, to include substance misuse education, information or services into local activity.
- Identify local targets and milestones that contribute to meeting the strategic targets and priorities in the Hertfordshire Young People's Substance Misuse Plan.
- Use information and data available from the Young People's Substance Misuse and Crime Reduction Service to inform plans, priorities and projects.
- Promote and share best practice with other partners.
- Think about involving the Young People's Substance Misuse and Crime Reduction Service when planning programmes.

Summary of priorities

Universal services

National developments over the past few months that provide a new focus for priorities in universal services have led to the following actions and outcomes in the Young People's Substance Misuse Plan:

- Contribute to consultation on new national guidance for schools (Ref. U2)
- National guidance for parents and carers on alcohol is included in parenting programmes in Hertfordshire. (Ref. U3)
- Ensure parents, carers and young people are aware of risks associated with drugs. (Ref. U4).

Targeted services

The development of integrated practice arrangements in Hertfordshire has informed activity to ensure that drug and alcohol services are included in common assessment and teams around the child where a need is identified. Earlier identification and intervention will lead to the following action and outcomes in the Plan and ensure that all children and young people who require a service receive one:

- CAF action plans include drug and alcohol interventions where appropriate. (ref. T1)
- Ensure YPSM services meet the needs of all young people including BME, and young people with disabilities (ref. T6)
- Ensure the Children's workforce is skilled in identifying and addressing substance misuse and emotional well being within their work (ref. T8).

Specialist services

A comprehensive needs assessment for young people's substance misuse in Hertfordshire was completed during the 2007/08 financial year.

This year a refresh of the 2007/08 needs assessment has been completed, focusing particularly on the treatment data. This includes activity undertaken by A-DASH targeted and specialist workers.

The National Treatment Agency defines young people's substance misuse treatment as 'care planned medical, psychosocial or specialist harm reduction interventions aimed at alleviating current harm caused by a young person's substance misuse.'

The treatment delivery system and structure is detailed in the Needs Assessment 2009, available as a separate document.

The treatment service aims to help young people improve their life chances and outcomes in the following ways

- Increased participation in positive activities
- Engagement in learning
- Increased self esteem and confidence
- Reduction in offending
- Improved mental health
- Improved relationships

A-DASH, the young people's treatment service is an outreach service, offering a range of interventions based on individual need that may include 1-1 or group based support. Engagement with the whole family is the preferred approach, however this is not always either possible or desirable.

The service provides

- Harm Reduction
- Psychosocial intervention such as CBT
- Criminal Justice Intervention
- Work with parents and carers
- Shared care schemes
- Pharmacological intervention
- Inpatient intervention
- Residential rehabilitation, including specialist foster care placements

In Hertfordshire young people's needs are met wherever possible in universal or targeted settings or services. Support from the dedicated young people's treatment service, A-DASH, is available to all young people who have been identified with a need

through the common assessment process and whose substance misuse is causing significant problems in terms of their physical, psychological or social functioning. The specialist service is open access, so young people or their families are able to contact the service directly.

The operational policy for the A-DASH targeted service has been amended this year to reflect integrated practice developments, allowing a service to be accessed where a CAF has been completed identifying a substance misuse need. This has made the service more accessible and enables earlier intervention and better outcomes for individual young people.

A-DASH will migrate to Care Notes in 2009-10. This new system will not facilitate detailed analysis to enable trend prediction. A request will be made for more detailed report facilities.

Priorities for further development in 2009-2010 include confirming a named individual from amongst the Hertfordshire PCT representatives on the Joint Commissioning Group to take a lead on the clinical governance overview:

- Increase referrals to A-DASH by 10% year on year by improving understanding of services offered (ref. S1).
- The increase in the use of cocaine as a secondary drug of choice will be monitored. A-DASH specialist workers will address individual's issues as part of the care planning process. The Hertfordshire Drug Education Forum will identify further opportunities for awareness raising and education and support key messages and resources from the national 'Pablo' cocaine campaign from FRANK.
- Improve clinical governance and audit arrangements across the young people's system. (Ref. S2)
- Launch the foster care toolkit and provide training and support to newly recruited specialist foster carers.

The strategy for tier 4 support in Hertfordshire has been to provide local, community based placements wherever possible. The lack of specialist young people's residential services in the region has led to a focus on developing treatment foster care. There has only been 1 residential placement in a specialist Tier 4 unit in 2008-09, although there has been an additional 1 young person successfully placed with foster carers. It is anticipated, based on previous years' experience, that there will be a demand for up to 5 places per year

A universal and consistent approach to education on substance misuse for all children and young people, parents and families

Ref to CYPP/ KPI's/ LAA	Action	Outcome	Lead	Support	Milestones
<p>U1</p> <p>PSA 14 CYPP Priority 12</p>	<p>Support schools and other settings to identify their contribution in effective provision of drug education within the framework of emotional health and well being.</p>	<ul style="list-style-type: none"> • Every child feels safe in their school. • All drug education in schools is good or better. • All schools have Healthy Schools accreditation. • All schools achieve good or better for emotional health & well being at inspection. • Annual decrease in drug related exclusions. • Provision for resilience is in all target schools and feedback is good or better. • Schools evaluate Resilience programme as good or better • FE Colleges supported to prepare for Healthy FE Framework • Validate card available through schools and colleges 	<p>Drug Education Consultant</p> <p>Resilience Programme Manager</p> <p>YPSM Drug Education Officer Head of Herts Trading Standards</p>	<p>Herts Resilience Steering Group</p> <p>CDRP's</p>	<p>Health Related Behaviour Questionnaire 2008 data analysed. April 2009</p> <p>Ongoing cycle of school inspections.</p> <p>Targets for December 09 from CSF Plan.</p> <p>Health & wellbeing Ofsted indicators introduced from September 09.</p> <p>Schools recruited April 2009</p> <p>Summer Training Programme July 2009</p> <p>Roll out programme September 2009</p> <p>Introduction in 2010</p> <p>From April 2009</p>

A universal and consistent approach to education on substance misuse for all children and young people, parents and families

Ref to CYPP/ KPI's/ LAA	Action	Outcome	Lead	Support	Milestones
U2 PSA 14 PSA 25 NI 115 CYPP Priority 12	Contribute to consultation on new National Guidance for schools	<ul style="list-style-type: none"> • Hertfordshire Drug Education assessed against current National Guidance through locally commissioned research • Local guidance, training and resources are produced based on Hertfordshire analysis • Consultation workshop held 	Chair of JCG Chair of DEF Chair of DEF	Drug Education Consultant County Drug Education Co-ordinator Drug Education Consultant County Drug Education Co-ordinator County PSHE Advisor	Report available July 2009 Update completed September 2009 Workshop held on November 2009
U3 PSA 25	Ensure parents and carers are aware of support available for drugs and alcohol issues.	<ul style="list-style-type: none"> • National guidance for parents and carers on alcohol is included in parenting programmes in Hertfordshire. 	Chair of Alcohol Campaign Group	Alcohol Campaign Group YPSM Partner Organisations, specifically parenting organisations	Review Guidance 30/04/09 Herts Drug Education Forum recommendations 31/07/09 Dissemination of information to partner organisations Sept 09 – March 2010

A universal and consistent approach to education on substance misuse for all children and young people, parents and families

Ref to CYPP/ KPI's/ LAA	Action	Outcome	Lead	Support	Milestones
U3	Ensure parents and carers are aware of support available for drugs and alcohol issues. Continued	<ul style="list-style-type: none"> Parents' and carers knowledge and skills about drugs and alcohol have increased, to enable them to better inform and protect their children, through improved parenting support. 	YPSM Drug Education Officer	Parenting Development Manager	Co-ordinated approach to drugs and alcohol in parenting programmes agreed September 2009
U4 PSA 14 PSA 25 NI 115 CYPP Priority 12	Ensure parents, carers and young people are aware of risks associated with drugs	<ul style="list-style-type: none"> Parents, carers and young people aware of the new classification of cannabis. Parent, carers and young people aware of FRANK and local services Smoking cessation support available through one stop shops. 	Chair of DEF YPSM Drug Education Officer	CDRP's DCTP's Youth Connexions Hertfordshire Tobacco Alliance	Design and produce resources to support new classification 30/04/09 Resources disseminated May 09 – March 2010 Stock updated 30/09/09 Effective practice from pilot disseminated June 2009 Training October 2009
U5 NI 115	Monitor the trends of drug use in Hertfordshire	<ul style="list-style-type: none"> Collection of information on trends of drug use amongst young people in Hertfordshire is used to inform services Relevant resources developed or purchased to reflect drug trends identified. 	YPSM Research and Information Officer YPSM Drug Education Officer	DEF Health Information Service Manager	Quarterly reports to district partnerships July 09, Oct 09, Jan 2010, Mar 2010 SLA agreement with Herts Health Promotion 30/04/09

A universal and consistent approach to education on substance misuse for all children and young people, parents and families

Ref to CYPP/ KPI's/ LAA	Action	Outcome	Lead	Support	Milestone
U6 PSA 14 CYPP Priority 12	Explore opportunities to motivate and involve young people in healthy lifestyles.	Young people aware of opportunities to be involved in the preparation for Olympics 2012	YPSM Project Officer	Team Leader - Health and Well Being CDRP's DCTP's	Include information in contracts for projects April 2009 and September 2009
U7 NI 115	Health Related Behaviour Survey results to be shared with districts.	<ul style="list-style-type: none"> • Distribute reports to inform local planning. • Health needs of BME young people have been identified. 	YPSM Research and Information Officer YPSM Research and Information Officer	Partnership Support Manager BME Strategy Manager	Presentations of data to 10 DCTP's and CDRP's April 09 – Dec 09 Report to HCTP BME Sub Group July/Aug 2009
U8 PSA 14 PSA 25 NI 115 CYPP Priority 12	Commission a service to co-ordinate information events across the county on cocaine and smoking. E.g. Fresher fairs & Health and Wellbeing events	<ul style="list-style-type: none"> • Young people have a great understanding of Young Peoples Substance Misuse services 	YPSM Project Officer	Commissioning Officer	Contract to be awarded April 2009 Events to take place May 2009 – March 2010

Children and young people receive targeted support when and where they need it.

Ref to CYPP/ KPI's/ LAA	Action	Outcome	Lead	Support	Milestones
T1 PSA 14 PSA 25 NI 40 NI 115 CYPP Priority 12	Drug and alcohol workers to attend Team Around the Child meetings as required	<ul style="list-style-type: none"> CAF action plans include drug and alcohol interventions where appropriate. 	YOT Managers	A-DASH Team Manager	Number of TAC meetings attended to be included in quarterly partnership bulletin July, Sept, Jan, April
		<ul style="list-style-type: none"> Children's services aware of A-DASH workers through involvement in integrated practice processes 	YOT Managers	A-DASH Team Manager	Number of CAF's and Integrated Practice meetings attended - reported quarterly at Drug Service Review Meetings
		<ul style="list-style-type: none"> Transition arrangements from targeted to universal services are strengthened through care planning 	YOT Managers	MAST Chairs	Reviewed at quarterly Drug Service Review Meetings
T2 PSA 14 CYPP Priority 12	Research the needs of young people who are sexually exploited.	<ul style="list-style-type: none"> Children's workforce have greater awareness of support needs around sexual exploitation. Increase awareness of support needs around sexual exploitation for the children's workforce Services meet the needs of young people. 	YPSM Research & Information Officer	Project Group	Articles in HCTP publication to generate interest in research June 2009 Project Task Group established September 2009 Recommendations and Protocol developed Jan – March 2010

Children and young people receive targeted support when and where they need it.

Ref to CYPP/ KPI's/ LAA	Action	Outcome	Lead	Support	Milestones
T3 PSA 14 PSA 25 CYPP Priority 12	Support the development of local services for Children of Substance Misusing Parents (COSMP)	<ul style="list-style-type: none"> • Appropriate services available for children and young people with substance misusing parents. • Appropriate services aware of the evidence based model. • Local partnerships have access to advice and support 	Chair of COSMP County Steering Group	Carers in Herts Adult Treatment Providers Youth Connexions (Targeted Youth Support)	<p>County report shared with district partnerships April – July 2009</p> <p>County Steering Group Action Plan developed May 2009</p>
T4 PSA 14 PSA 25 NI 115 CYPP Priority 12	Develop and support innovative activities for vulnerable young people with an emphasis on alcohol and/or anti social behaviour	<ul style="list-style-type: none"> • Young people access projects across the county. • Young people have better understanding of the effects of drug and alcohol on their lives. 	Chair of the JCG	YPSM Project Officer Funding Sub Group	<p>First round of funding April – May 2009</p> <p>Second round of funding Sept 2009</p>
T5 PSA 14 CYPP Priority 12	Pilot a health and wellbeing interactive education project within Education Support Centres and e2e settings	<ul style="list-style-type: none"> • Vulnerable young people have a better understanding of a healthy lifestyle. • Schools and .FE. settings have access to evidenced based approach. 	YPSM Project Officer	YPSM Drug Education Officer	<p>Project piloted April – July 2009</p> <p>Evaluated results Sept – Dec 2009</p> <p>Workshops to take place December 2009</p>

Children and young people receive targeted support when and where they need it.

Ref to CYPP/ KPI's/ LAA	Action	Outcome	Lead	Support	Milestones
T6 PSA 14 PSA 25 NI 115 CYPP Priority 12	Ensure YPSM services meet the needs of all young people including BME, and young people with disabilities	<ul style="list-style-type: none"> An Equalities Impact Assessment completed for all Young Peoples Substance Misuse services 	YPSM Policy and Development Manager	CSF Equalities Officer	<p>Assessment completed July 2009</p> <p>Action Plan developed September 2009</p>
T7 PSA 14 PSA 25 CYPP Priority 12	Investigate the use of interactive alcohol programmes with young people who have learning difficulties	<ul style="list-style-type: none"> Drug and alcohol education needs of young people with learning difficulties identified and action plan developed. Guidance to schools and F.E. settings provided. 	YPSM Drug Education Officer	<p>YPSM Research and Information Officer</p> <p>CSF Participation Team</p> <p>F.E. settings Special Schools</p>	<p>Tool identified and programme reviewed April – June 2008</p> <p>Groups identified June 2008</p> <p>Programme introduced September 2009</p>
T8 PSA 14 PSA 25 CYPP Priority 12	Ensure the Children's workforce is skilled in identifying and addressing substance misuse and emotional well being within their work.	<ul style="list-style-type: none"> Training courses for professionals reflect trends, national and local guidance and Integrated Practice arrangements. TIPS activities and exercises are more accessible for children's workforce. 	YPSM Project Officer	<p>DEF members</p> <p>CSF Learning & Development</p>	<p>Review of training programmes which include drug and alcohol April – June 2009</p> <p>Relevant training programmes altered to reflect new arrangements Sept – Dec 2009</p> <p>TIPS activities available to Hertfordshire's workforce on DEF website September 2009</p>

Ref to CYPP/ KPI's/ LAA	Action	Outcome	Lead	Support	Milestones
T8	Continued Ensure the Children's workforce is skilled in identifying and addressing substance misuse and emotional well being within their work.	<ul style="list-style-type: none"> Effective practice for delivering targeted alcohol education to parents and carers whose children and/or young people misuse alcohol has been produced. 20% of referrals to A-DASH include a completed screening based on 'CRAFFT' CRAFFT Tool is used for all children looked after as part of pathway plans for care leavers. CRAFFT tool is used for every child looked after aged 14+ years as part of the placement meetings. 	YPSM Drug Education Officer	Parenting Development Manager Head of Placement and Provider Services	Effective practice produced. April 2009 Guidance disseminated. May – June 2009 Effective practice and programmes reviewed June – October 2009 Alcohol education programmes monitored. November 2009
T9 PSA 25	Provide additional support to extended families when a family member is using drugs and/or alcohol.	<ul style="list-style-type: none"> Evidence based training resource/DVD has been used with staff and Grandparents. Services working with extended families meet any drug and alcohol related needs. 	YPSM Policy & Development Manager	Carers in Herts	Review resource July 2009 Identify local support groups/programmes/trainers July - September 2009 Deliver training programme September-October 2009 Evaluate programme and agree next steps November 2009
T10	Support counselling services for vulnerable young people within community settings	<ul style="list-style-type: none"> Counselling available for young people, for whom substance misuse is a significant part of 	YPSM Project Officer	CHeCC HYHG	Contracts developed and signed with CHeCC and HYHG

Ref to CYPP/ KPI's/ LAA	Action	Outcome	Lead	Support	Milestones
		<p>their attempts to manage distress, disturbance and homelessness.</p> <ul style="list-style-type: none"> • Access to regular 1 hour counselling for vulnerable young people across the county within a community setting at a suitable time. 			<p>May 2009</p> <p>Review of contracts October 2009</p> <p>End of Year Reports available April 2010</p>

Children and young people receive specialist support where their substance use is impacting on their: education, training, employment, their family, social relationships and their mental or physical health

Ref to CYPP/ KPI's/ LAA	Action	Outcome	Lead	Support	Milestones
S1 PSA 14 PSA 25 NI 40 NI 115 CYPP Priority 12	Increase referrals to A-DASH by 10% year on year by improving understanding of services offered. Baseline: 2008-09 target 147 Actual total 166	<ul style="list-style-type: none"> • Wider understanding of A-DASH services by children's workforce and general public • 100% of young people 14 years and over have been screened as part of a placement planning meeting and pathway planning for care leavers. • 90% of young people have been catered for in young people services. • 25% of referrals to specialist services have been from children and family services 	A-DASH Team Manager Head of Placement and providers Services A-DASH Team Manager	YPSM Drug Education Officer YOT Managers	Launch of handbook and promotional materials May 2009 CRAFFT training provided Sept 09 – March 2010 50% of handbooks disseminated Sept 09 – March 2010 Presentations and attendance at MAST's, Integrated Practice networks April 2009 – March 2010
S2 NI 40	Improve clinical governance and audit arrangements across the young people's system.	<ul style="list-style-type: none"> • 100% young people, carers and referring agencies have received feedback form. • 20% returns received. • 70% rated the service received as good or better. 	A-DASH Consultant A-DASH Team Manager		Quarterly reports in partnership bulletins July, Sept, Jan, April Monthly returns

Children and young people receive specialist support where their substance use is impacting on their: education, training, employment, their family, social relationships and their mental or physical health

Ref to CYPP/ KPI's/ LAA	Action	Outcome	Lead	Support	Milestones
	YPSM Research & Information Officer will provide external audit function to monitor data quality.	<ul style="list-style-type: none"> • Returns of data to NDTMS were timely and accurate. • Staff competent in data entry • Introduce a progress monitoring tool for under 16's using appropriate questions from TOPS. • 90% young people have a completed TOPs 	<p>YPSM Research & Information Officer</p> <p>A-DASH Consultant</p>	MUSE	<p>Data entry started April 2009</p> <p>Develop tool April – July 2009 Pilot tool July – Dec 2009 Evaluate & implement tool Jan– March 2010</p>

Children and young people receive specialist support where their substance use is impacting on their: education, training, employment, their family, social relationships and their mental or physical health

	Action	Outcome	Lead	Support	Milestones
S3 NI 40	Ensure that A-DASH is compliant with "You're Welcome" Quality Standards.	<ul style="list-style-type: none"> Self assessment completed and results evaluated. 	A-DASH Team Manager	YPSM Research & Information Officer	Self assessment against quality standards September 2009 Report to Joint Commissioning group 30th September 2009
S4 NI 40	Improve clinical arrangements response to dual diagnosis.	<ul style="list-style-type: none"> Care Pathways developed and used with those who have a dual diagnosis 	Head of YPSM	Emotional Well Being & Mental Health Commissioning Manager	Protocol written and signed off April 2009 Review care pathway October 2009
S5 PSA 25 NI 40 NI 115	Hospital Accident and Emergency Departments to signpost or refer appropriately children and young people with substance misuse needs to A-DASH.	<ul style="list-style-type: none"> A-DASH materials available in A + E for staff and families. Referrals received from Accident & Emergency and reported to NDTMS. 	YPSM Research and Information Officer	A-DASH PCT Children's Commissioner	Materials available in all Accident and Emergency Departments June 2009 Monthly reports to NDTMS

Children and young people receive specialist support where their substance use is impacting on their: education, training, employment, their family, social relationships and their mental or physical health

	Action	Outcome	Lead	Support	Milestones
S6 PSA 25 NI 40 NI 115	Review Harm Reduction provision including needle exchange, blood bourn virus, and sexual health against national guidance and effective practice.	<ul style="list-style-type: none"> All young people with a history of injecting offered a personal Hep. C test with pre and post counselling and appropriate treatment. All A-DASH staff competent in providing harm reduction modalities. 100% of young people with a history of primary or secondary cocaine use offered an intensive support package to include general health check, blood bourne virus and sexual health check. Sexual health assessment and intervention protocols in place. 	<p>A-DASH Consultant</p> <p>A-DASH Team Manager</p> <p>A-DASH Team Manager</p> <p>A-DASH Consultant</p>	<p>Sexual Health Services</p> <p>Sexual Health Services</p> <p>Sexual Health Service Managers</p>	<p>Commence April 2009</p> <p>Monthly reports to NDTMS</p> <p>Programme of Training events April – July 2009</p> <p>Monthly reports to NDTMS</p> <p>Protocol written August 2009</p>
S7 NI 40	Improve workforce competence in line with the 2007 clinical guidelines.	<ul style="list-style-type: none"> Induction programmes to ensure all new A-DASH targeted staff meet requirements of clinical guidance and integrated practice arrangements. A-DASH staff qualified in National Award. 	<p>Policy & Development Manager</p> <p>A-DASH Team Manager</p>	<p>A-DASH Team Manager CAMHS Manager</p> <p>YOT Managers</p>	<p>Induction programme developed April 2009</p> <p>Implemented when workers start posts</p>

- PSA 14 = increasing the number of young people on the path to success
- PSA 25 = Reduce the harm caused by alcohol and drugs
- NI 40 = Drug users in effective treatment
- NI 115 = Substance misuse by young people
- CYPP Priority 12 = Keeping young people on the right track.

Approved on behalf of Hertfordshire Drug and Alcohol Action Team:.....

Sue Darker, Assistant Director of Adult Care Services

Endorsed on behalf of Hertfordshire Children's Trust Partnership:

John Harris, Director of Children's Services

Completed by Chair of Young People's Substance Misuse Joint Commissioning Group:

Lindsay Edwards, Head of Young People's Substance Misuse and Crime Reduction Services