

# **SERVICE SPECIFICATION ADDACTION IMPACT Tier two/ Three Young People Drug Service**

## **1. PRINCIPLES OF CARE**

The -----Project shall abide by the following care principles when providing the Service:

- Service Users have the right to dignity, privacy and independence.
- Respect for the Service User and his/her way of life.
- Maintaining a confidential Service.
- Involving the Service User in decisions relating to Service delivery

The service shall be delivered according to the key principles outlined by HAS (1996) and SCODA (now Drugscope) and the Children's Legal Centre (1999)

- Child centred
- Respecting and protecting of the rights of children and adolescents
- Lawful
- Respectful of family and child
- Comprehensive
- Integrated
- Accessible
- Effective, efficient and targeted
- Competent

References to drugs in this document refer to prescribed medicines, over the counter medicines, volatile substances and alcohol as well as other illicit drugs.

## **2. QUALITY STATEMENT**

In providing Services, ----- shall ensure its staff shall maintain high standards of professional behaviour and job performance in carrying out their work.

The key legislative framework will be as set out by the Children Act 1989, the Human Rights Act 1998, and the Misuse of Drugs Act 1971. The principles of this legislation are endorsed within the Health Advisory Service Thematic Review "Children and Young People Substance Misuse Services" (1996, 2001), the National Strategy "Tackling Drugs to Build a Better Britain" and subsequent strategic planning including the development of the Young People Substance Misuse Plan, Quality in Alcohol and Drug Services (SCODA), Assessing Local Need, Assessing Young People's Drug Taking (SCODA & DPAS 2001, 2000 respectively) and the Ten Key Policy Principles for working with young drug misusers (SCODA, Children's Legal Centre 1999).

These principles will be extended by the active compliance with the Race Relations Act (1976), the Sex Discrimination Act (1975), the MacPherson Report and good practice standards for Equal Opportunities and Anti Discriminatory Practice, the UN Convention

on the Rights of the Child, the Disability Discrimination Act (1995) and the Government White Paper "Valuing People" (2001)

The ----- is expected to show it has the following:

- 2.1 A statement identifying overall aims and philosophy of care/support.
- 2.2 A clear definition of service user group.
- 2.3 Provision for carrying out assessment of need for clients.
- 2.4 Young People appropriate literature about the service.
- 2.5 An equal opportunities policy in relation to the availability of the service.
- 2.6 A health and safety policy; including a policy on HIV infection and related illnesses.
- 2.7 A drugs related incident policy including specific reference to section 8 of the Misuse of Drugs Act (1971).
- 2.8 A written complaints procedure.
- 2.9 A written child protection policy and confirmation of working under Camden Area Child Protection Committee Guidelines.
- 2.10 A confidentiality policy specific to working with Young People.

### **3. THE SERVICE**

3.1 Objectives of the Service:

- To provide a specialist young person's drug and alcohol service in the boroughs of Camden and Islington.
- To assist the DAT strategy to reduce the number of young people using drugs which cause the most harm by 25% by 2005 and 50% by 2008.
- To provide a comprehensive prevention and early intervention service for Young People at risk of becoming or who are problematic drug users.
- To provide an advice and information service for young people, parents and professionals.
- To promote amongst non-specialist services knowledge and understanding concerning the needs of young people who are misusing substances.
- To work jointly with other Young People services in sharing practice, understanding responsibilities and providing drug specific support , information and training to these organisations as appropriate.
- To provide an analysis of need reported back to the DAAT to inform local strategy decisions
- To provide Basic Level Drugs Awareness 1 and 2 courses to professionals who work with young people
- To develop Screening Tools around substance misuse with local agencies and to provide training around their use with local professionals

- To work with detached youth workers on local estates to offer Tier 2 interventions around substance misuse
- To ensure links are developed with Tier 4 Young People's Treatment and Adult Treatment to ensure transitional provision is developed
- To ensure interagency planning and communication
- To work jointly with Social Services and Health to ensure performance indicators around assessing, referring, supporting and reviewing vulnerable young people are met
- To work with Youth Offending Team and local police to ensure work is developed with young offenders.
- To work with young people in custody suites where appropriate and to provide training to individuals who are designated as "Appropriate Adults"

### 3.2 Description of the Service:

The current team comprises of the following

Service name Camden and Islington Young People's Drugs Service	
Post	Borough
Manager	Camden and Islington
Team Leader	Camden and Islington
Tier 2 Worker	Camden
Tier 2 Worker	Islington
Tier 3 Worker	Camden
Tier 3 Worker	Islington
YOT Worker	Camden
Ethnic Communities Worker	Camden and Islington
Administrator	Camden and Islington
Volunteer	Camden and Islington

#### Planned packages of care for Young People

Service name - will deliver advice and support around substance misuse in accordance with the 4 Tier model of interventions for young people (HAS Review 2001)

Service name - will deliver work around Tier 2 and Tier 3 interventions as defined below:

- **Tier 2 services** (*for young people who may be vulnerable*): providing drug-related prevention and targeted education, advice and appropriate support for those identified as at risk of developing problems with substance misuse, in addition to Tier 1 services.
- **Tier 3 services** (*for young people who are problem drug users*): providing specialist (mainly non-medical) drug services and other specialist services that work with complex cases requiring multi-disciplinary work, including GPs and other primary care workers.

All parts of the service operate using a harm reduction model

According to the HAS Review 2001 tier three interventions include:  
Specialist assessment leading to a planned package of care and treatment augmenting that already provided by Tiers 1 and 2 and integrated with them.  
Initial assessments carried out, referral where appropriate and tracking of young people in the service.  
Transitional provision for young people who are entering Adult Treatment, including assessment, support and tracking.  
Ensure links are developed with Tier 4 Young People's Treatment and Adult Treatment to ensure transitional provision is developed

Specialist substance specific interventions including mental health issues  
Family assessment and involvement  
Interagency planning and communication  
Impact offers this provision as well as advice and information sessions within other services and drug education training for Young People, professionals and other adult groups. The project is also able to develop services as appropriate to the needs of the client group and community and in accordance with the YPSMP and DAT strategy.  
All parts of the service operate using a harm reduction model.

### 3.3 Where the Service shall be provided:

The service name and location. The service is also provided in other satellite venues as required.

- Satellite sessions for Young People in Islington 16+ Leaving Care
- Pulse N7
- Fresh Start
- Highbury Park PRU

Further sessions should be developed as the need is identified

### 3.4 When the Service shall be provided:

The core hours of the service are 10 am until 6pm Monday to Friday inclusive. Appropriate provision to be delivered over holiday periods, bank holidays and Christmas. A pilot of Saturday opening hours will be delivered within this financial period.

### 3.5 Volume of Service:

Per year:

80 training sessions; 60 Tier 2 sessions and 20 BME sessions

500 individual advice and information contacts including 110 BME contacts

200 new Tier 3 clients per year

### 3.6 Cost of service:

The total cost of the service across Camden and Islington is £260,000. This cost is split equally between the two boroughs.

Please add in figures from our discussion.....

### 3.7 Target Group for the Service:

The ----- aims to provide a service for Young People under the age of 19 years living in Camden and Islington. Service provision will include training for those professionals who work with young people in Camden and Islington

#### 3.7.1 Eligibility Criteria

Young People must live in, or be the responsibility of, Camden or Islington Local Authority, and must be under the age of 19

#### 3.7.2 Referral Source and Process:

Referrals are accepted from parents and professionals with permission from the young person as well as directly from Young People (self referral). When a referral is received the information is recorded and an initial response provided within 48 hours.

#### 3.7.3 Exclusion Criteria:

Young adults over 19 will not be provided with a direct Tier 3 service but will receive a supported referral to Adult Services.

### 3.8 Facilities to be provided by the Council/PCT:

NONE

### 3.9 Equal Opportunities in Service Delivery

The ----- shall abide by its equal opportunities policy and the service shall acknowledge and respond to in positive and practical ways the specific needs of Young People, clients with different cultures, young women and those from different ethnic backgrounds and users with disabilities. (Policy attached)

## 4. **STAFFING** (this refers to paid staff, volunteers and agency staff)

4.1 The ----- shall employ staff who are appropriately qualified, competently trained and skilled and experienced. It shall ensure that all staff are properly instructed and supervised in the provision of the service.

#### 4.2 Staff Involvement

The ----- shall ensure at all times that there are sufficient staff in order to carry out the service as described in this agreement.

#### 4.3 Staff Supervision:

The ----- shall ensure that staff are properly supervised. All staff working directly with Young People in relation to the service must be provided with regular case supervision in order to ensure reflective practice and that the needs of the service user are being met. Such supervision may be internal or external to the service.

#### 4.4 Staff training:

All staff working with Young People must be able to show evidence of training in the following:

- a) Child Protection
- b) Misuse of Drugs Act
- c) Health and Safety
- d) Equal Opportunities and Anti Discriminatory Practice
- e) The Pharmacology of Drugs
- f) Young People and Drug Use
- g) Skills in Initial Assessment, Referral and Tracking.
- h) Skills in data collection.
- i) Knowledge of the local Crime Reduction Agenda

The Organisation shall ensure that staff are appropriately trained in order to carry out their duties and meet any relevant statutory requirements.

#### 4.5 Staff Checks:

4.5.1 The ----- shall obtain a satisfactory reference from the most recent previous employer and at least one other satisfactory reference prior to the person coming into post.

4.5.2 The ----- shall require from applicants a declaration of convictions that would otherwise be spent under the Rehabilitation of Offenders Act (Exceptions) Order 1975.  
***This applies if the employee works with people over the age of 65; or people suffering from serious illness or mental disorder of any description; or people addicted to alcohol or drugs; or people who are blind, deaf or dumb; or other people who are substantially and permanently disabled by illness, injury or congenital deformity.***

4.5.3 The Council shall ensure that police checks are carried out in line with statutory requirements.

***This applies when employees are applying for work which will give them substantial unsupervised access on a regular basis to children under the age of 16; or children under the age of 18 who have special needs; or children under the age of 18 who are looked after by the local authority (for residential care staff only).***

## 5. QUALITY ASSURANCE

### 5.1 Quality system:

The project will be managed within the existing organisations name structure. The activity of the service will be measured according to the revised targeted outcomes:

#### Targeted Outcome 2

By March 2004, young people identified locally as being at risk of becoming drug users, including 100% of pupils in Pupil Referral Units, young offenders supervised by YOT's and children looked after by Social Services Departments, will receive targeted prevention programmes and by March 2008 all these programmes will be delivered by practitioners accredited in line with occupational standards (DH output supported by HO, DfES, Connexions, YJB)

- Targeted Outcome 4 By March 2004 in 80% and by March 2006 100% of areas, LEA's, PCT's YOT's, SSDs and and CXP's will work together to provide integrated programmes of treatment, care and support to all young people identified as having a substance misuse problem. (DH/NTA output, supported by HO, DfES, Connexions, YJB)

Using criteria defined by the HAS reviews (1996, 2001) for describing factors influencing vulnerability, protective factors a set of suggested outcome measures have been provided against which a picture of the quality of the service's provision can be measured.

The activity of the service will also be measured against the National Drug Strategy Core KPI's/Measures for Young People:

#### Young People KPI/Measure (2)

This indicator is intended to ensure that vulnerable young people are aware of the impact that drug use can have on their lives and that they have enough information to make informed choices, including where to get help and advice.

#### Young People KPI/Measure (3)

This indicator is intended to indicate that early intervention and treatment are being accessed by young people in or in touch with Children's Agencies, who are assessed as in need of such interventions so that their life chances are improved

The ----- will report on activity and expenditure on a quarterly basis to the Camden Drug Action Team Young People Sub Group, and the Islington Young People and Drugs Group.

The ----- will report on activity to the Islington Strategic Planning Sub Group and expenditure and activity to the Islington Commissioning Subgroup, on a quarterly basis. There will be a quarterly meeting with the Islington and the Camden Young People's Co-ordinators and regional management.

All funding will be reviewed annually with consideration given to the level of funding received from national silos and percentage of uplift as well as individual project activity.

The ----- will provide accurate and complete information at the end of the year for the Home Office Annual Return

The Project will have a role in developing tools for the assessment, referral and tracking of young people, in both Camden and Islington boroughs.

The project will provide data on vulnerable young people, young people at risk, and young people from BME groups

The project will provide accurate information on ethnicity and gender monitoring

The Organisation must abide by the Grants and Conditions as specified.

#### 5.2 Complaints Procedures for Service users and carers:

The Organisation shall inform its Service users that they can use either the Organisation's complaints procedure or the Community Care or Children's Act Complaints procedures or both.

#### 5.3 Confidentiality:

The ----- shall employ the following methods to ensure that information in relation to Service Users is kept confidential:

attach Organisation's confidentiality policy here.

#### 5.4 Service User involvement:

[State methods here.]

#### 5.5 Carer involvement

The ----- will work with Carers as appropriate to individual cases.

## **6. MONITORING AND EVALUATION**

### 6.1 Performance Indicators:

State the outputs required:

[Outputs (quantitative measures) to be finalised before the Service Agreement begins, based on the objectives of the Service. Amount of outputs to be specified.]

- a) Waiting Lists
- b) Number of new clients
- c) Number of continued clients
- d) Number of assessments carried out
- e) Number of Looked After Children and Young People "at risk" in Islington assessed, providing explicit data around ethnicity, gender, and age and drug of choice
- f) No of individual plans reviewed
- g) Number of young people tracked
- h) Number of completed training sessions completed and evaluated within 6<sup>th</sup> form colleges
- i) Number of completed training sessions completed and evaluated with professionals
- j) Number of awareness raising sessions completed and evaluated with groups of Young People

- k) Number of individual support plans started
- l) Number of individual support plans finished
- m) Number of referrals received
- n) Number of young people screened at satellite sessions
- o) Number of young people assessed for Tier 4
- p) Number of young people supported during and after Tier 4 interventions
- q) Number of young people attending support group for young people with drug using parents
- r) Number of young people referred and supported in referral to Adult Drugs Services
- s) Number of referrals received from young people in Custody Suites
- t) Number of new BME clients
- u) Number of new clients per year
- v) Number of existing clients being supported beyond a 12 week period

Outcomes required:

- a) Changes in crime related behaviour
- b) Changes in drug using behaviour
- c) Changes in physical health
- d) Changes in mental health
- e) Changes in other behaviour
- f) Number of referrals to other organisations
- g) Number of referrals to Addaction Impact from organisations receiving training (Seven Outcomes)

#### 6.2 Financial Monitoring:

The ----- project shall provide quarterly income and expenditure statements in relation to the Service. It shall also provide audited accounts for the previous year as soon as possible but not later than six months from the end of each financial year.

#### 6.3 Standard Monitoring form:

The Organisation shall send the Link Officer in Camden (Natalie Morel), and in Islington (Barbara O'Rourke) a completed standard monitoring form at the end of every three month period throughout the Term.

#### 6.4 Monitoring and Evaluation Meetings:

Formal monitoring meetings shall take place between the Organisation and the Link Officers at least quarterly and unannounced visits on the Organisation shall take place by the Link Officer and the Operational Officer as appropriate.

#### 6.5 Negotiating changes in the Service due to changing needs or demands:

Any changes shall be negotiated via the formal monitoring meetings. If necessary the proposed changes will be taken to the appropriate Commissioner and Provider meeting for a decision.

## **7. RESPONSIBILITIES FOR MONITORING THE SERVICE**

### 7.1 Name of project t:

The Project shall inform the Link Officer immediately if there is a change to the Authorised Representative and if there is likely to be a substantive change to the Service or any matter affecting the service users or the provision of the Service.

The Standard Monitoring Form shall be completed and forwarded to the Council at the end of every three month period throughout the Term.

### 7.2 The Council:

The Link Officer in Camden(Natalie Morel)and in Islington (Barbara O'Rourke) shall be the first point of contact for the Service and shall be responsible for the monitoring of the Service and any consultation with the Organisation.

The Operational Officer (an Officer from the Community Care or Children's Divisions) shall liaise with the Authorised Representative to offer knowledge and expertise on Service provision.

## **APPENDIX A - CONTACT DETAILS**

Authorised Representative responsible for the Service within the Organisation  
Rebecca Cheshire Project Manager Address as above

Camden Council's Link Officer.

Natalie Morel

Senior Development Officer Vulnerable Young People and Substance Use  
Strategy Partnership and Performance

79 Camden Road

London

NW1 9ES

Phone 020 7974 6666

Fax 020 7974 6707

Council's Operational Officer.

Peggy Schaffter

Principal Officer

Camden Youth offending Team

115 Wellesley Road

Gospel Oak

Camden

Phone 020 7974 6762

Islington Councils Link Officer

Barbara O'Rourke

Vulnerable Young People's Co-ordinator

Islington Drug and Alcohol Action Team  
Room 105  
Municipal Offices  
222 Upper Street  
N1 1XR  
Phone 0207 527 3427

**APPENDIX B - POLICIES AND PROCEDURES OF THE ORGANISATION  
REFERRED TO IN THE SERVICE SPECIFICATION**

For example, Complaints, Confidentiality, Health and Safety, Equal Opportunities in Service Delivery.