

## **Purchasing**

### **Example Service Specification Leicester Drug & Alcohol Action Team (DAAT)**

#### **OVERARCHING SERVICE PRINCIPLES**

##### **Values and Principles**

1. The Providers services should be accessible, acceptable and appropriate to the needs of all service users, including members of ethnic minority communities and hard to reach groups.
2. The Provider will ensure that the services it offers are in line with nationally recognised best practice, locally agreed policies, protocols, guidelines and current evidence of effectiveness, including child protection and vulnerable adult procedures.
3. Services should be co-ordinated and targeted and work within the policies of the DAATs and relevant national requirements.
4. The Provider will work effectively and efficiently with other relevant services and agencies to deliver strategic and service aims and objectives. This will include systems agreed with other providers for referral, needs assessment and shared care/treatment and outcome monitoring.
5. The Provider will recognise both the rights and responsibilities of service users as set out in the SCODA Drug Service User's Charter of Rights and Responsibilities.
6. The Provider will take account of the needs and views of service users and their carers in order to offer an appropriate and acceptable service.
7. The Provider will have in place appropriate local management structures that ensure effective service delivery, appropriate support and supervision of staff, and to promote strategic planning and effective inter-agency collaboration.
8. The Provider will ensure that staff will be appropriately trained to undertake their work. This includes both generic (e.g. confidentiality, health and safety, risk assessment, equal opportunities, etc.) and specific skills required for their area of work.
9. The Provider must comply with the requirements of Quality in Alcohol and Drugs Services Standards (QuADS) and to ensure that it employs a workforce that meets the professional competencies required by QuADS.
10. The Provider will demonstrate the effectiveness and cost effectiveness of its services in meeting the service aims and objectives.

## **SERVICE SPECIFICATION**

between

**Leicester Drug and Alcohol Action Team**

### **MENTORING PROJECT**

#### **1.0 NATIONAL STRATEGIC OBJECTIVE**

- 1.1 All young people identified as being vulnerable will receive appropriate support within looked after care.

#### **2.0 AIMS AND OBJECTIVES**

- 2.1 To provide a mentoring scheme to looked after young people and care leavers aged between 12 and 19 years of age who are identified as being most at risk of substance use.
- 2.2 To prevent early substance use by young people developing into problematic substance use by supporting young people to access specialist drug treatment or advice that will promote a reduction in substance use.
- 2.3 To increase the young persons self-understanding and awareness of their motivation to misuse substances.
- 2.4 To provide support and encouragement for young people to access opportunities that focus on and enhance their educational and employment prospects.
- 2.5 To promote opportunities for young people to receive information and support in respect of drugs and health information.

#### **3.0 OUTCOMES / PERFORMANCE INDICATORS**

- 3.1 The aims of the project are to secure sustained improvement in looked after young peoples:-
- a) substance use problem in 100 per cent of all cases.
  - b) physical and psychological health in 75 per cent of all cases.
  - c) attitude towards education and training in 50 per cent of all cases.
  - d) accommodation arrangements in collaboration with other service providers..
  - e) social skills, confidence and self esteem in 70 per cent of all cases.
  - f) relationships with friends and family in 70 per cent of all cases.
  - g) offending behaviour in 40 per cent of all cases.

#### **4.0 ELIGIBILITY CRITERIA**

- 4.1 Services will be provided to young 12 to 19 year old people residing in Leicester, who are currently in care or classified as a child in need, moving towards independent living and who have been identified as being most at risk of substance use.

## **5.0 CASE ASSESSMENT AND REVIEW**

- 5.1 All referrals will be from the Social Services Department as part of a detailed Care Plan for each young person. There will be regular progress reports to the Project Manager to outline the action plan between the mentor and the mentee, the frequency and timing of meetings and outcome of reviews.

## **6.0 SERVICE AVAILABILITY**

- 6.1 The service will be provided from the project base at the Leicester YMCA, 7 East Street, Leicester and mentoring programmes will be accessible through various locations in the community in consultation with young people.
- 6.2 The service will be contactable at its administrative base 5 days a week, Monday to Friday 8.30 to 5.00 for 52 weeks per annum except bank holidays. A telephone answering service will be available on those occasions when the base is not staffed. Telephone messages will be recorded and responded within two next working days.

## **7 SERVICE OUTPUTS - OPERATIONAL**

The project will aim to provide:

- 7.1 a one-to-one volunteer mentoring scheme that is available throughout the duration of the young persons involvement with the project. Mentors will offer young people, positive, non-judgemental and supportive coaching and encouragement to raise their aspirations, build self-esteem and self-confidence. Young people will be encouraged to reach their individual identified goals through guidance, problem solving and constructive criticism. The scheme:-
- a) will aim to be available on a flexible basis over five days a week to meet individual mentors needs and in consultation with the mentor, mentees and referrer.
  - b) will attempt to match mentors with mentees giving due regard to gender and cultural factors, after initial training, selection and police checks.
- 7.2 access to structured, skills based group programme and health information services for up to 16 young people per annum utilising:-
- a) brief motivational interviewing and counselling.
  - b) reintegration programmes for young people eg anger management
  - c) providing relevant and accessible materials promoting drug education.
  - d) community based activities.

There will be opportunities for mentors and mentees to participate in joint activities and issue based workshops such as anger management. Additional training for mentors and young people will be accessed via the Drug and Alcohol Response Team network (such as Health Promotion Agency).

- 7.3 an ongoing structured training and support programme for up to 15 volunteer mentors in order to equip them with appropriate knowledge and skills to enable them to perform their role competently. Up to three training sessions will be organised each year for mentors. Individual mentors will be required to give a 12 month commitment to:-
- a) maintain contact with the young person at least once a week.
  - b) keeping up to date records of meetings with young people.
  - c) attend mentor training sessions.
  - d) attend mentor support sessions.
  - e) participate in developmental training sessions.
- 7.4 Tier One and Tier Two Drug Awareness training to enable mentors to identify substance related issues and deal with them appropriately using evidence based practices leading up to appropriate interventions. This training will also lead to an understanding of the level of competence and roles of different agencies when dealing with child protection issues. Training courses will also address confidentiality, motivational interviewing and boundary setting.
- 7.5 support sessions for mentors every six weeks.
- 7.6 support, advice and information to up to 15 parents and carers per annum where appropriate and in consultation with the young person and the mentor. Effective links will be made with the New Directions Parents and Carers worker in order to make available resources to parents and carers.
- 7.7 information and training sessions for those agencies who may refer to the project in liaison with the Social Services Department.
- 7.8 facilitate referrals to organisations within the Drug and Alcohol Response Team and to ensure the needs of young people are addressed comprehensively.

## **8.0 SERVICE OUTPUTS - STRATEGIC ROLE**

- 8.1 The project will organise a multi-agency steering group to discuss the progress of the project and to address and respond to both concerns and achievements. In order to secure improvements in health, living situation and education, the Project Manager will seek the engagement of statutory and voluntary generic and specialist drugs services (such as Social Services, Housing, Education, Youth Offending Teams, Connexions, New Directions etc).
- 8.2 The Project Manager will need to co-ordinate their work programme and activities on an on-going basis in order to meet the priorities of the following strategies and structures:-
- a) DAAT Young Persons Substance Misuse Plan and Treatment Plan
  - b) Local Healthy Schools Programme
  - c) Health Improvement Plans

8.3 An important aspect of the workers remit will be to liaise and work with other agencies within the Drug and Alcohol Response Team through regular attendance at meetings eg DART Operational Group, DAAT Drug Reference Groups etc.

## **9. QUALITY STANDARDS**

9.1 The organisation must comply with the requirements of Quality in Alcohol and Drugs Services standards (QuADs).

a) The organisation ensures that staff and volunteers demonstrate competence in the support skills they offer to service users including:-

- i. communication and engagement with the service user
- ii. counselling and motivational techniques
- iii. knowledge of law relating to principles of confidentiality
- iv. risk assessment and management
- v. legislation in relation to drug misuse
- vi. the effects and uses of prescribed drugs

b) The organisation will ensure there are adequate means of communication and formal supervision to staff and volunteers.

c) There is a satisfaction audit of other professionals and agencies carried out on an annual basis.

d) The organisation will have appropriate systems and procedures in place to support the case management and review process.

## **10. PERFORMANCE INDICATORS**

10.1 The organisation will establish procedures for service monitoring and review to enable the following statistics to be produced.

10.2 The organisation may be required to participate in the submission of returns required by the DAAT, National Drug Treatment Misuse System (NDTMS) and the revised datasets required by the National Treatment Agency.

10.3 For the purpose of this specification the organisation is required to provide the following information on a quarterly basis (unless stipulated otherwise) and should be categorised (by age group, gender and ethnicity)

### **(A) Service Details (QUARTERLY)**

- (i) Total number of referrals received by source.
- (ii) Total number of those assessed.
- (iii) Number of mentor sessions offered.
- (iv) Total number of service users commencing programme each month.
- (v) Number of training sessions attended by mentors.
- (vi) Total number of service users in scheme by duration.
- (vii) Number of service users discontinuing scheme each month with reasons.
- (viii) Number of complaints

(ix) Number of advice sessions to parents and carers.

(B) **Mentors (QUARTERLY)**

- (i) Total number of volunteers recruited and trained (by gender/ethnicity)
- (ii) Number of volunteer recruitment drives.
- (iii) Number of volunteer training sessions/courses provided.
- (iv) Number of volunteer review and support sessions delivered.
- (v) Number of volunteers discontinuing with reasons.

(C) **Service User Perspective (ANNUALLY)**

**Drug Taking**

- (i) Reduction in the number of young people reporting drugs as primary issue
- (ii) Reduction in the quantity and frequency of drug taking
- (iii) Increase in number of people reaching controlled or non-dependent stage

**Physical**

- (i) Number of young people registered with GP.
- (ii) Percentage of young people reporting improvements physical health
- (iii) Percentage of young people reporting improvements psychological health

**Living Circumstances**

- (i) Number of young people reporting improvement in social functioning (family and other relationships).
- (ii) Number of young people accessing educational and training opportunities.
- (iii) Number of young people reporting improvements in offending behaviour.
- (iv) Number of young people entering tenancies.
- (v) Number of young people reporting improvements in financial situation.

**Services Received**

- (i) Modifications to services following consultation meetings with users
- (ii) Annual audit of service user satisfaction dealing with:-
  - response times
  - service availability
  - attitude of volunteers
  - how their case was handled
  - usefulness of support

(D) **Inter-Agency Work**

- (i) Protocols with DART members
- (ii) Number of consultancy events
- (iii) Referrals to other agencies

**10. Policies and Procedures**

10.1 The organisation will be expected to adhere to the policies and procedures that are enshrined within QuADs and these will be implemented and regularly reviewed in the

light of operational requirements. The following are highlighted as being of particular significance to meeting the requirements of this specification:-

- a) Locally agreed risk assessment policy
- b) Confidentiality
- c) Complaints
- d) Service users Rights and Responsibilities
- e) Professional Conduct
- f) Violence at Work
- g) Staff Supervision

**11. DAAT Contribution:**