

North Yorkshire Children's Trust Board  
18<sup>th</sup> January 2010

Update on the development and delivery of the North Yorkshire Young People's Substance Misuse Strategy.

- 1.0 Key points.**
- 1.1 There is a requirement for an annual assessment of young people's substance misuse treatment needs. The first draft of the North Yorkshire Treatment Gap and Need analysis has been completed which is indicating are some clear symptomatic indicators of the key areas of attention for 2010-11.
- 1.2 The National Treatment Agency (NTA) have announced that the Partnership Grant, and North Yorkshire's Treatment allocation has been cut. The cut is spread across two years, with £4,000 in 2010-11 and a predicted further cut of £16,000 in 2011-12.
- 1.3 With identified and unmet need indicated in parts of the county a service provision realignment is being proposed.
- 1.4 The Board's attention is also brought to the issue of availability of medical intervention for the treatment of substance misuse, namely substitute prescribing (Methadone) Whilst there is very little demand, there is a joint statutory requirement between the Local Authority and the PCT to identify the availability and access to medical services. There is currently no formal protocol for this provision in North Yorkshire.
- 2.0 Recommendations.**
- 2.1 That the Board endorse the proposed service realignment as described in 4.5 and 4.6
- 2.2 That the Board acknowledges that to continue to provide high quality treatment provision costs of other activity will need to be met from other service areas. (See 4.7)
- 2.3 That the Board uses its influence with partners to request the PCT to establish the protocol for substitute prescribing as a matter of urgency. (See 5.6).
- 3.0 General information**
- 3.1 The key purpose of the report is to bring the attention of the Board the key areas of concern in relation to young people's substance misuse treatment which will be used to inform the planning and commissioning of service provision of intensive intervention.
- 3.2 There is a statutory requirement for each Local Authority to work in partnership to meet the needs of Young People in relation to substance misuse.
- 3.3 The Partnership Grant is meant to enhance the provision but not be the sole source of the financial contribution with other funding being made available from other sources, for example from the Area Based Grant. North Yorkshire contributes to the delivery of the Young People's Substance Misuse strategy through activity in schools and youth settings at Universal and Targeted levels.
- 3.4 Integrated Youth Support contributes to the management and directly to service delivery at all tiers of intervention.
- 4.0 Summary of key priorities based on local needs.**

- 4.1 Hambleton and Richmondshire has been identified as an area of particular concern specifically in relation to young peoples alcohol consumption and need for treatment intervention. Information from the police, safer partnership and substance misuse workers over the past year, has indicated a rise in the need for treatment provision for young people, in two specific areas, Catterick Garrison and Thirsk.
- 4.2 The case load and continued demand on the existing treatment provider has been consistent with the anecdotal information from other professionals. Feedback from young people suggests that they are unlikely to recognise their use as problematic and therefore are unwilling to engage with treatment.
- 4.3 The risk taking behaviour IYS Adviser working with schools has identified the secondary school near the Garrison as a school where targeted work would be beneficial. Work will start there in 2010, which is likely to further increase the demand on treatment provision as awareness is raised.
- 4.4 In Thirsk the identification of a cohort of young people who regularly attend Thirsk Clock, has led to a significant increase in the identified need for treatment services. The service user group profile is significant, with a group of hard to reach 15-18 yr olds using Mephadrone and Alcohol to excess. The estimated number accessing Thirsk Clock for support is 500, with approximately two thirds regularly using substances. Typically this has been a group that does not access the commissioned treatment services.
- 4.5 It is proposed that the treatment provision covering Hambleton and Richmondshire is increased with a specific contractual requirement for additional support in Thirsk working in partnership with Thirsk Clock.
- 4.6 To finance the additional provision in Hambleton and Richmondshire it is recommended that there is a reduction in service provision in two areas where there is less identified need. These areas are Selby and Craven. Monitoring of the services in these areas indicates an absence of symptomatic indicators and therefore it would be feasible to slightly reduce the provision from 1.85fte In Selby to 1.5 fte and from 1fte in Craven, to 0.75fte.
- 4.7 The reduction in provision in Craven and Selby district would only partially meet the increase in Hambleton and Richmond and an additional £20,000 would be need to be diverted from other areas of activity (funding of tier 2 work, training and management) currently funded by the grant. This will impact on IYS where there will be an additional strain on its budget to absorb the costs of the activity.
- 5.0 Substitute prescribing for young people.
- 5.1 As standard all young people should have access to "Five Essential Elements" as outlined by the National treatment agency. One of the five elements of substance misuse treatment is pharmacological services such as substitute prescribing (Methadone),
- 5.2 This is a shared partnership responsibility and it is not intended that these pharmacological services are funded through the young people's substance misuse grant which is managed by the Children's Trust. The provision should be commissioned by the PCT alongside other medical interventions for children and young people, with a joint protocol which identifies the care pathway including the referral route.

- 5.3 The recently published document, '*Guidance for the pharmacological management of substance misuse among young people: NTA best practice guidance 2009*', clearly outlines the protocols for service delivery within children's medical services.
- 5.4 In North Yorkshire there is a verbal agreement with the PCT that the treatment needs of young people in relation to medical interventions, including substitute prescribing will be met. However there is no formal arrangement in place that matches the NTA guidance.
- 5.5 A recent incident enabled the verbal agreement to be tested and it was found wanting with no clear mechanism in place to treat a young person who required assessment for Methadone. This type of demand remains low but it is an essential element of the treatment provision for young people.
- 5.6 It is recommended that the PCT establish a formal protocol which reflects the national good practice guidance.

Louise Dunn  
Chair Young People's Substance Misuse  
Joint Commissioning Group

Leigh Bell  
Young People's Substance Misuse  
Commissioning Manager