



Llywodraeth Cynulliad Cymru
Welsh Assembly Government

Guidance for the Planning and Provision of Substance Misuse Services to Children and Young People in the Care of Youth Offending Services





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1. Purpose

This document provides a summary from the evidence, professional opinion and existing policy statements on what is best practice in relation to the interventions of substance misuse for children and young people who offend during their involvement with the youth justice system. It is targeted primarily at the local partnerships that must co-operate in order to provide and commission appropriate services for these individuals, namely:

- Youth Offending Team (YOT) Partnerships.
- Children and Young People's Partnerships.
- Community Safety Partnerships.
- Substance Misuse Action Teams.

It will have particular relevance for substance misuse professionals within YOTS, those who provide substance misuse services outside the YOT, CAHMS providers and other organisations providing specialist services to young people.

The guidance is intended to assist stakeholders in the planning and delivery of appropriate services and development of standards for the provision of these services. When commissioning or planning a service the specification should reflect the identified needs. Service planners/commissioners should also ensure the inclusion of information sharing protocols between Youth Offending Teams and service providers in the service specifications. CSPs and SMATs should ensure the YOT is fully engaged in its work and as a partner in the development, planning or commissioning of relevant substance misuse services.

The Guidance on Good Practice for the provision of services for Children and Younger People who Use or Misuse Substances in Wales module of the SMTF provides good practice in planning guidance and states that it is essential that agencies that are responsible for planning services for children and young people base their approach on a jointly agreed strategic approach that is underpinned by the local CYPP.

This document is based upon a National Public Health Service (NPHS) rapid review of both the evidence base and current policy guidance (available on the NPHS website) in conjunction with an expert reference group. It draws very heavily on the Youth Justice Board publication *Key Elements of Effective Practice Substance Misuse* (www.yjb.gov.uk) and the National Treatment Agency for Substance Misuse publication *Assessing young people for substance misuse*.

The guidance needs to be read in conjunction with the Working Together to Reduce Harm Substance Misuse 10 year Strategy 2008 - 2018 which sets out the approach to tackling the full range of substances that are misused in Wales and covers illegal drugs, alcohol, prescription only medicines (POM), over the counter medicines (OCT) and volatile substances. It should also be read in conjunction with existing treatment frameworks for substance misuse produced by Welsh Assembly Government particularly the framework for Children and Young People who misuse substances. substance.misuse@wales.gsi.gov.uk.

This document addresses key care planning processes and the generic contribution of all members of the youth offending teams from whatever professional background in treating those with substance misuse problems. There is, however, a specific section on the role of the YOT based specialist substance misuse worker with clear statements made about their role and functions.

The document essentially has 4 sections:

Context

Care Planning processes

The role and Function of specialist YOT substance misuse workers

Management and Service Development

2. Context

It is widely acknowledged that young people who misuse drugs, alcohol or other substances cause considerable harm to both themselves and society. Substance use is common amongst children and young people who offend.

Research undertaken on behalf of the Home Office on a sample of clients of youth offending teams established that 85% had used cannabis, alcohol and tobacco and 20% heroin or crack cocaine. Local experience suggests that in Wales this figure is significantly lower. Only 15% however were rated as being at high risk of substance misuse problems. Alcohol, tobacco and cannabis were more strongly related to offending than other drugs. The report suggested that the combination of substance use with offending may increase both the risk of becoming substance dependent and/or a persistent offender.

Children and young people who offend are likely to be at an early stage of their substance using career and may be more amenable to interventions than those with more long standing problems. They are also much less likely to have substance related health problems.

The youth offending team or service (YOT) has a critical role to address a range of factors that are associated with anti-social and offending behaviour among children and young people. Their role extends beyond managing those who have entered the criminal justice system and includes the co-ordination of youth crime prevention and anti-social behaviour diversionary services on behalf of the community safety and children and young people's partnerships.

The Crime and Disorder Act (1998) placed a statutory requirement to establish multi-agency YOTs in metropolitan, unitary and county council local government areas.

YOTs' work and performance is overseen by the non-departmental government body the Youth Justice Board (YJB) which sets priorities in Wales with the Welsh Assembly Government under the All Wales Youth Offending Strategy.

YOTs undertake the following general roles:

- assess the risk and protective factors in a young person's life that relate to their offending behaviour, to enable effective interventions to be implemented
- provide support to young people on police and court bail
- provide support to young people in the court setting
- supervise and manage the cases of children and young people who offend
- provide support to young people who have been released into the community from custody
- provide early intervention and preventative work, both in terms of criminality and ASB
- undertake strategic planning and performance monitoring - YOTs must report on their performance in a number of key areas to the Welsh Assembly Government and the YJB on a quarterly basis.

3. Care planning

3.1 Screening and assessment

Assessment is crucial in all substance misuse scenarios but the process has particular importance in the context of young people. In order to determine the needs of young people with substance misuse problems and formulate appropriate interventions a comprehensive picture of the young person's life is needed.

3.1.1 Approach

In undertaking a young person's substance misuse assessment a discursive, interactive approach should be used in order to understand the issues from the young person's perspective, whilst allowing the assessor to pass on information and advice. Important aspects of the process should include:

- Level of knowledge of substances and associated risks.
- Where, how and with whom they use substances.
- Who else of their friends and family uses drugs.
- Whether substances are being used to control thoughts or behaviour.
- Expectations of how substance use affects their lives.
- Hopes and fears in relation to substance misuse and being drug and alcohol free.
- Their goals.
- Who can support them in changing their substance misuse behaviour.

3.1.2 Assessment as an intervention

The substance misuse assessment offers an opportunity to engage the young person in their intervention and intervention choices as well as being vital for the development of an intervention plan.

The substance misuse assessment process will often present opportunities for immediate intervention prior to the completion of the assessment process as a whole and the agreement of a substance misuse intervention plan. In many cases immediate intervention is vital to the prevention of substance related harm, thus must be acted upon. Examples of immediate intervention can include:

- Providing advice and information on less harmful ways to consume, reduce or stop taking substances.
- Using brief intervention techniques designed to encourage reflection on substance misuse.
- Using motivational interviewing techniques to increase engagement in the assessment and subsequent treatment process.
- Involving other agencies in the assessment or intervention of the young person and their parent or carer.
- Focussing on the initiation of a prescribing intervention to reduce substance-related harm and to act as a gateway to other interventions.

Care Pathways should be in place at a local level to ensure that young people in the YOT have access to the whole range of services, which includes those outside of the YOT, for which they have an assessed need.

3.1.3 Risk assessment

As part of the risk management and risk reduction framework substance related risks need to be identified and links to other health practitioners whether those dealing with general health matters or CAMHS specialists need to be made.

Factors indicating substance related risk may include:

- Overdose, deliberate self-harm and attempted suicide.
- Substance misuse in risky contexts for example in the presence of older people (e.g. parents, siblings, older partners), in association with sexual exploitation or risky sexual behaviour, in association with offending behaviour, in dangerous physical environments.
- Issues around dose, route or combinations of substances. For example amounts and effects that indicate extreme intoxication, injecting, direct inhalation of volatile substances (especially butane), poly-substance use, drugs or alcohol administered by another person.
- The lower the age the greater the risk.
- Co-existing mental health problems (psychosis, post-traumatic stress disorder, suicidal ideation, self-harm).
- Co-existing physical health problems (epilepsy, respiratory and heart conditions, pregnancy, interactions with prescribed medication).

3.1.4 Other aspects of assessment

Some other important aspects that need to be included in the assessment process are listed below:

- Demographic and contact details should be recorded as part of the assessment as well as the young person's involvement with any other agency.

- Needs others than those related to substance misuse should be explored. If the young person is in contact with other agencies the substance misuse assessment needs to complement and build on these agencies assessments.
- Cultural needs, such as choice of first language, should be determined at the earliest opportunity in order to facilitate effective communication with the child or young person.
- It is important to obtain a comprehensive history of the young person's substance misuse. Issues around the length and pattern of use, its complexity and whether there is physical or psychological dependence will need to be taken into account in deciding on appropriate interventions and the likely length of interventions.
- The social and health impacts of substance misuse will need to be considered.
- Injecting behaviour should be considered and young people may need medical investigation. Issues such as immunisation (for example against hepatitis B) may need to be considered.
- Any child protection consequences of the young person's substance misuse will need to be addressed.

3.2 Delivery of interventions

This section sets out the evidence supporting the delivery of interventions and is based on the Youth Justice Board publication *Key Elements of Effective Practice Substance Misuse* (www.yjb.gov.uk) which applies to the work of substance misuse services within the YOT. As such, it should not supersede existing best practice in terms of partnership working around the interface between YOT substance misuse practitioners and young people's substance misuse services in the wider community. The Welsh Assembly Government Substance Misuse Treatment Framework Guidance on Good Practice for the provision of services for Children and Younger People who use or misuse substances in Wales also sets out evidence based services that are to be provided within the YOT.

3.2.1 Substance misuse interventions

Improved outcomes for children in relation to substance misuse can only be delivered and sustained when key people and bodies work together to design and deliver more integrated services around the needs of children and young people. When delivering substance misuse interventions all YOT workers should provide advice and support (Tier 1) services which should:

- Inform and help with handling the pressures to use substances that they are likely to experience.
- Convey accurate and balanced information about substances and their use and misuse.

Specialist substance misuse workers will provide interventions (Tier 2 and in some instances Tier 3), which are:

- **Universal education.** These programmes should increase knowledge about substances including alcohol and tobacco, provide an environment in which the norm is to remain drug and tobacco free and respect the

sensible use of alcohol, reduce consumption and/or delay the onset of first use and contribute to minimising harm caused to people who use or misuse substances.

- **Selective or targeted programmes.** Selective or targeted are programmes that are aimed specifically at groups of children and young people, or young adults, whose profile of risk and resilience factors is considered to place them at greater risk of either using substances or moving from their use to misuse.
- **Indicated programmes (including treatment).** Indicated programmes are provided as individualised and planned programmes of assessment, intervention and care for certain identified children or young people who are misusing substances.

Full details of these services can be found in the Substance Misuse Treatment Framework (SMTF) Guidance of Good Practice for the provision of services for Children and Younger People who Use or Misuse Substances in Wales.

3.2.2 Residential treatment

- Specialist substance misuse interventions may be provided in a residential setting.
- A young person would normally only be placed away from their usual home to decrease risk from substance misuse and undergo highly intensive intervention.
- Evidence from the USA has found that residential treatment appears to be as effective as community based services.
- Those with dual diagnosis, those who misuse cocaine, heroin or alcohol may benefit from more intense interventions such as that provided in a residential or inpatient setting.
- There is some evidence from the USA, that residential facilities using a therapeutic community approach where participants are punished for breaking rules in a hierarchical system of peers and staff are ineffective in making positive changes in substance misusing behaviour in young people who offend.

(Currently no specialist residential treatment is available for young people in Wales and the numbers requiring this type of provision are likely to be very small).

3.2.3 Group work

- Group work is as effective as individual work in reducing substance misuse but young people, particularly in a custodial setting may not feel fully able to participate.
- Group work sessions on offending behaviour could include substance misuse components but this should not be a replacement for individual specialist substance misuse services for children and young people.
- Group work can be used with young people with substance misuse problems and conduct disorder.

- No difference in effectiveness has been found between cognitive behavioural therapy and psychoeducational therapy although integrating family therapy with cognitive behavioural therapy provides superior results.

3.2.4 Multi-systemic therapy

- A combination of family interventions as part of substance misuse interventions may produce more rapid changes in reducing substance misuse among young people in the short term.
- Combining family interventions with cognitive behavioural therapy is superior to educational group work.
- Multi-systemic therapy has been shown to be effective as both an early intervention and when used with more entrenched substance misuse. Effectiveness may be enhanced by adding contingency management components such as the need to provide negative substance tests.

3.2.5 Brief interventions

- Brief interventions have been shown to reduce alcohol use, increase engagement with interventions facilities and reduce substance misuse. They may be used where there is a crisis point such as arrest, hospital admission or entering custody.
- Brief interventions may be less effective for those with low levels of substance misuse and not at a crisis point but among this group self-assessment and reflection can promote behaviour change particularly in relation to alcohol and tobacco.

3.2.6 Case management

- A YOT Supervising Officer will complete a general assessment (Asset), which includes education, home life and substance misuse, and will agree a package of interventions. The YOS substance misuse worker will provide input to the Substance Misuse Care Plan.

3.2.7 Smoking

- Smoking cessation groups for young people may be effective. One to one counselling using motivational interviewing and brief interventions have been found to be effective. Brief telephone advice can enhance the effectiveness of self help materials.
- Smoking cessation programmes have been found to be successful in custodial settings and among young people undergoing substance misuse interventions. Programmes for young people should have a range of components:
 - Intensive support - group or one to one.
 - Self-help materials.
 - An offer of nicotine replacement therapy.
 - Brief advice via phone or electronic media.
 - Social support via a buddy system or internet.
 - Monitoring and tracking progress.

3.3 Transition to adult specialist substance misuse services

Guidance from the National Treatment Agency for Substance Misuse *Assessing young people for substance* misuse states that when a young person is making the transition to adult services a plan should be developed jointly. The transition should be a stepped approach including:

- Acknowledgement of the move from a young people's service to an adult service.
- With consent, sharing information with the adult team about current circumstances.
- Introducing the young person to the adult keyworker and attending several joint appointments.
- Introducing young people's parents or carers to the adult service and discussing their role in the young person's care, where the young person agrees to this.
- Developing a new care plan in tandem with the adult service provider.
- Ensuring that wider needs are addressed within the care plan.
- Ensuring a review date is set that the young person, the specialist young person's worker and the new adult service worker will attend.

3.4 Discharge and aftercare

Substance misuse aftercare should be planned by the specialist substance misuse service and fed into a multi-agency plan. Substance misuse aftercare may include:

- A contact in a mainstream or targeted service who will respond if there is a substance related incident.
- Emergency contact numbers and the number of the specialist substance misuse service.
- A pack or information sheet reinforcing positive goals that have been achieved and how to stay on track.
- Relapse prevention, harm reduction and overdose advice.
- Additional support services for education, training, employment and leisure.

There are four Resettlement and Aftercare Programmes in Wales which have been funded by the YJB. They work with children and young people leaving custody with a significant risk of substance misuse and/or dual diagnoses mental health problems. The model has been shown to be an effective way of providing continuity of care for these individuals and local areas may wish to consider replicating.

4. Youth offending team substance misuse workers

Every YOT in Wales will be resourced for specialist substance misuse provision which is delivered in accordance with local need. It is an essential requirement that these specialists have access to clinical supervision and can maintain their specialist role within the YOT.

A YOT substance misuse worker is a source of expertise and advice to the rest of the team. They also have a role of education and awareness raising for the team.

The Youth Justice Board, in conjunction with the National Treatment Agency, has developed guidance for youth offending team substance misuse workers and below is summary of these key functions and roles:

Training, Support, and Advisory Role

- To ensure that all youth offending team workers receive appropriate training, support and advice in delivering screening and appropriate interventions.

Relationships with Specialist Substance Misuse Services

- To develop and maintain effective working relationships with young people's substance misuse services to ensure that effective referral and care management are in place, that youth offending team provision and substance misuse provision are complementary and that young people's needs are met.

Information

- To ensure that appropriate information to support effective substance misuse care planning is received from custodial staff for all young people returning to youth offending team care from secure provision.
- To ensure that for all children and young people entering the secure estate appropriate information to support effective substance misuse care planning is sent to custodial substance misuse and health staff.
- To support youth offending team case workers in providing substance misuse information to the court to facilitate appropriate sentencing.

Deliver Interventions

- To carry out substance misuse interventions, including case-planning and care-coordination, as appropriate to qualifications, skills and training and in accordance with local arrangements.

Resource Identification

- To ensure that resources are in place to enable substance misuse staff to engage with young people (and their families) before they leave custody in order to develop supervision or care management plans.

Aftercare resettlement

- To provide support and advice to resettlement and aftercare schemes.

Community Sentencing

- To ensure that effective case management, care planning and review systems are in place so that young people on community sentences receive appropriate substance misuse interventions and care.

The balance of each of these activities is a matter for local determination.

5. Management and service development

5.1 Training and Staff development

Training and staff development is a prerequisite for ensuring that the YOT workforce has the appropriate competencies. Best practice indicates that:

- Managers should be aware of, and familiar with, Youth Justice National Occupational Standards in relation to substance misuse and Drug and Alcohol National Occupational Standards.
- Practitioners and managers should keep abreast of workforce developments for people who work with children and young people in England and Wales by visiting the Children's Workforce Development Council website and the Skills for Justice Workforce Council.
- Practitioners working with young people with substance misuse problems require competencies in child and adolescent development and family dynamics, as well as substance misuse. These competencies need to be mapped to the Workforce Strategy and Common Core which will be published in November 2009 and will be mapped across to NOS. YOT Managers are to ensure that training is NOS compliant.
- Intervention approaches outlined in Welsh Assembly Government good practice guidance, DH clinical governance guidance and others as appropriate can be successfully integrated into existing substance misuse services.
- Staff should have access to training in psychometrically-sound tools to enable them to undertake adequate screening of substance-related needs. Screening is normally undertaken by YOT officers using the YJB approved assessment forms Asset/Onset. The YOT specialist substance misuse service will also complete a specialist substance misuse assessment as necessary. These substance misuse assessments are linked to the YJB assessment tools for all children and young people sentenced to custody. Training in adolescent development, the role of the parents/carer and the use of decision trees (a model that describes problems and matches them to interventions intended to remedy the problems) should also enhance the assessment process and access to appropriate services.
- Staff should have access to training to better understand the needs of young women and young people from BME and rural communities in Wales.
- Simple interventions, such as brief motivational interview techniques, can be taught to practitioners without formal counselling qualifications in relatively short periods (about one week).

5.2 Strategic management

YOT's are part of the criminal justice system and any service provided by the YOT must have regard to the primary aim of the youth justice system "the prevention of offending and re-offending by children and young people."

YOT substance misuse services are one part of a much wider range of services that the YOT can employ to tackle youth offending, and as such their work must integrate with this wider agenda.

In essence YOTs provide a structured needs assessment identifying risk and protective factors associated with offending behaviour to inform effective interventions. Interventions whilst having regard to the welfare of the child must also take account of the purposes of sentencing, namely the punishment, reform and rehabilitation of offenders, protection of the public, and the making of Reparation by offenders to persons affected by their offending.

Key to the success of any multi agency intervention is the effective sharing of information to manage risks and needs.

In relation to local strategic management issues the following should be noted:

- The effectiveness of youth justice interventions may be enhanced by increasing access to specialist substance misuse services.
- Managers and commissioners should work with local substance misuse commissioners to ensure that services meeting the needs of young people with substance misuse problems who offend are provided locally.
- Joint working systems with external substance misuse services should be developed to enhance access for young people who offend. This could include:
 - developing protocols on sharing information
 - improving understanding of the needs of young people who offend
 - increasing awareness of how to work with young people with challenging behaviour
 - using a steering group to engage all local stakeholders
 - agreeing referral criteria to external projects.
- Managers should understand the interplay between screening, assessment and referral for substance misuse needs, and ensure that measures are taken to standardise procedures so that young people's needs are met.
- Managers should ensure that there is some expertise within the team in relation to understanding and addressing the specific needs of young people as identified in local needs assessments.
- In order to meet the needs of young people with dual diagnosis, close working relationships should be established between health, mental health and substance misuse workers, both within youth justice settings and with external agencies.
- Managers should endeavour to establish a service level agreement with their local CAMHS provider to ensure access to this service for their clients as appropriate.
- Managers should ensure that appropriate services are in place through the planning process so that young people who offend can access the substance misuse interventions services they need.

5.3 Monitoring and evaluation

In addition to national monitoring arrangements YOTs agencies can undertake additional monitoring of substance misuse to determine local needs and priorities. YOTs are also in a good position to undertake or support local evaluations of service delivery and measure the effectiveness of interventions, data on which is currently lacking. Any monitoring or evaluation work should be undertaken in line with the research standards jointly produced by the YJB and the National Offender Management Service's Research, Development and Statistics directorate.

The following is listed as good practice:

- The development of tracking and monitoring systems which can help to measure a service's progress. The data collected can also provide information to a range of stakeholders, contribute to future planning and help to identify unmet needs.
- The use of systematic screening and assessment instruments which will improve the opportunities for monitoring and evaluation, and improve the quality of data collected.
- When evaluating the effectiveness of substance misuse interventions, evidence of lower threshold behaviour, such as contact with the police and warnings, may give better indications of change rather than the number of arrests and convictions.

Glossary

Brief intervention

An intervention delivered in a single session designed to encourage self-reflection and/or engagement with longer term interventions. Sessions would usually last an hour or less and often use motivational interviewing.

Contingency management

Contingency management is based upon principles of behaviour modification. It involves providing positive reinforcement (in the form of clinic privileges, vouchers or payment) when clients achieve specified behaviours or interventions goals.

Social influences approach

Social influence is the change in behaviour that one person causes in another, intentionally or unintentionally, as a result of the way the changed person perceives themselves in relationship to the influencer, other people and society in general.

Motivational interviewing

A directive, client centred counselling style that aims to encourage reflection on the risk associated with behaviours, such as substance misuse, in the context of personal values and goals.

Multi-systemic therapy

This is an intensive community based intervention. Its purpose is to make positive changes in the social systems that contribute to serious anti-social behaviour in children and young people. These social systems include home, school, community and peer relations.

Psychoeducational

In this document this refers to group work that is focused on the physiological consequences of substance misuse.

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