

# **Community Wellbeing & Safety Scrutiny Committee**



## **Scrutiny Review Of Substance Misuse Provision for Young People in the Vale of Glamorgan**

**Final Report  
August 2005**

Councillor Janice Birch  
Chairman Community Wellbeing & Safety Scrutiny Committee  
The Vale of Glamorgan Council  
Civic Offices  
Holton Road  
Barry  
CF63 4RU

## Foreword



*Councillor Janice ME Birch  
Chair  
Community Wellbeing & Safety Scrutiny Committee*

This is the first scrutiny review to be undertaken by the Community Wellbeing & Safety Scrutiny Committee since it was decided that Scrutiny Committees should take a more proactive role in the Improvement process. The decision to scrutinise substance misuse provision for young people was identified through the Council's Annual Risk Assessment process and through member engagement. This identified provision as an operational risk leading to increased crime and disorder and problems associated with social exclusion.

The review considered what was done locally to prevent substance misuse amongst young people in the Vale of Glamorgan and identified gaps in existing services. This work has been carried out with support from officers from the Improvement & Development Team and the Lifelong Learning & Education and Community Care & Health Divisions.

I would like to thank all who took part in this review. The process of scrutinising substance misuse provision for young people in the Vale of Glamorgan was greatly enhanced by the way all participating services co-operated fully to give as much information as possible and answer key questions honestly and comprehensively. This has enabled the Committee to identify key areas for improvement, which focus upon building on the strengths of existing services, creating more coherent but diverse services and providing long-term stability for service provision across the Vale of Glamorgan. The areas of improvement have in turn informed the Committee's recommendations for improving services for young people in the Vale of Glamorgan overall.

## Executive Summary

This review of substance misuse provision for young people was undertaken by the Community Wellbeing and Safety Committee. It considered what was done locally to prevent substance misuse amongst young people in the Vale of Glamorgan and identified gaps in existing services. The decision to scrutinise substance misuse provision for young people was identified through the Council's Annual Risk Assessment process and through member engagement. This identified provision as an operational risk leading to increased crime and disorder and problems associated with social exclusion.

The review forms part of the 2005/6 planned work programme of the above Scrutiny and was carried out in line with the Council's Overview and Scrutiny methodology. This included a scoping exercise, completion of a baseline assessment of existing services and a final report. Notable practice across England and Wales was also identified and these informed the recommendations for improving overall provision for young people across the Vale of Glamorgan. The review work was undertaken with the support of officers from the Improvement & Development Team and the Lifelong Learning & Education and Community Care & Health Divisions.

Local authority activity around substance misuse sits within the national framework that is primarily shaped by the national drugs strategy, *'Tackling Substance Misuse in Wales: A Partnership Approach, (2000)*. This strategy reflects the overall aims and objectives of the government publication, *'Tackling Drugs to Build a Better Britain (1998)*. The strategy emphasises a partnership approach, integration and co-ordination, an evidence-based and proactive approach, accountability and a long-term focus in addressing substance misuse issues at all levels. The Welsh Assembly Government (WAG) has set key targets in relation to reducing substance misuse amongst young people.

In line with WAG guidance, responsibility for commissioning substance misuse services falls within the remit of the Vale of Glamorgan Community Safety Partnership (CSP). The Substance Misuse Action Team (SMAT) has responsibility for monitoring overall progress/performance of the Local Substance Misuse Action Plan (LSMAP). The SMAT also operates as the substance Misuse Advisory Planning Group within the Vale of Glamorgan's Health and Social Care joint planning/commissioning structures. Representatives from the Local Health Board, South Wales Police, South Wales Probation Services, South Wales Fire Service, the Local Medical Committee, Drug and Alcohol Services, Substance Misuse Advisory Regional Team (SMART) and service and provider agencies from the statutory, independent and voluntary sectors sit on the group.

All commissioning funding comes from the Welsh Assembly Government, Health, Local Authorities and Criminal Justice Agencies. There are seen to be too many different funding streams each with their own targets, criteria and length of funding. There are too many short-term initiatives and not enough consolidation of funding into core service grants/contracts. This makes it difficult and time consuming for service agencies to secure funding and can detract from funding and running their core business. Overall, this has a negative impact on core service development and sustainability of provision.

Commissioning and provision of substance misuse interventions covers the four-tier model outlined in the Health Advisory Service (HAS) report, 1996. Interventions in the Vale range

from universal education through to highly specialist provision. Tier 4 specialist provision, which entails medical support services, is undertaken on a regional basis.

The young people's element of the Vale of Glamorgan's SMAP is delivered via a number of distinct but linked 'services' which include the CSP, School Support Officer, Inroads Vale Drugs Project, Option 2, Brynffynon Child and Family Services, Turning Point Vale Arrest and Referral Scheme and Whitchurch Hospital.

The information available on substance misuse services in the Vale suggests there is an increase in the number of young people misusing.

The review found that there are service gaps in the provision of substance misuse services for young people across the Vale. The issues contributing to this include the limited Substance Misuse Action Plan Funding (SMAPF) allocated to the Vale of Glamorgan CSP, short-term funding streams for projects and the lack of a comprehensive assessment of local needs.

There is a wealth of innovative substance misuse prevention work being undertaken within schools and in various locations across the Vale through established links between the Education Service, Youth Service, Youth Offending Team, the Inroads Vale Drugs Project and South Wales Police.

There is currently no Commissioning Group established within the CSP to undertake the role of service planning and commissioning for young people, although this responsibility and the budget for substance misuse is now held by the Vale Community Safety Partnership

The responsibility for commissioning and provision of services for young people within the transitional ages of 17 and 25 is an issue that requires clarification at both the national and local level. At present different ages are applied by Health, the Education Service and Social Services as determined by various legislation guidance.

The review revealed a complex service and planning structure with a plethora of commissioners and funding streams. This currently inhibits the development of co-ordinated and linked services. There is a mixture of statutory and voluntary organisations involved in service delivery with the majority of the service providers being in the voluntary sector.

Whilst a lot of innovative work is being undertaken within the Vale, the longer-term future of these services remains unsecured. There is no doubt that an increased effort is required with regards to early intervention, diversionary and prevention activities and this has been identified as a priority in the LSMAP. However, funding to achieve these in the long term is limited and unsecured.

WAG SMAP funding allocated to the Vale of Glamorgan CSP is amongst the lowest in Wales. This funding is directed at achieving WAG priorities as per funding conditions. Furthermore, funding does not appear to be realistic of actual costs of delivering services including employing appropriate staff (on longer term contracts), managerial and administrative support, and the development of appropriate infrastructure.

There is on the whole, a great deal of commitment and enthusiasm between service providers and commissioners to tackle the problems being faced in the Vale. There is also a great deal of expertise and knowledge. However, if the lack of progress in tackling the core funding issues persists, people are likely to become disenchanted and much of the impetus and commitment will be lost. The issue of representation from some key statutory partners within the SMAT needs to be addressed.

WAG and Home Office funding is directed at provision for young people with substance misuse and criminal justice problems. Funding for treatment services is currently lower in comparison. There are concerns that this shift in funding is likely to result in longer waiting times for young people who do not fall within this category.

There is a lack of sufficient funding for additional staff to develop substance misuse services. In addition, it is likely to become more difficult to attract and retain staff because the restricted funding means that posts are often on a short-term and part-time basis.

The review highlighted the limited presence of substance misuse services for young people in the Western Vale and in Penarth. It also highlighted limited tier 2 preventative services, which specifically target vulnerable groups such as the homeless, looked after children, care leavers, young people excluded from school and the children of substance misusing parents. At present, there are no alcohol misuse services for young people in the Vale although this is an area that is currently being developed.

A lack of equity in provision to Vale residents was identified in relation to services provided in partnership with Cardiff. These partnership arrangements need to be re-examined.

Performance management in relation to substance misuse provision is limited. The review identified a lack of consistent and quality baseline data to inform service planning and commissioning. The recent introduction of the WAG led performance management framework is likely to improve baseline data in the future, particularly as the SMAPF conditions now include the collection and reporting of accurate performance data as a prerequisite.

The recommendations identified from the review are split into two areas, those that need to be addressed at a national level via Welsh Assembly Government and those that may be addressed locally between the Council and its partners via the Community Safety Partnership. The national issues have significant funding implications that cannot be addressed at the local level. Recommendations from the review are as follows:

Cabinet is requested to consider and approve each of the following Community Wellbeing and Safety Scrutiny Committee recommendations in relation to substance misuse services for young people in the Vale:

- (i) That Cabinet support the Community Safety Partnership (CSP) and the Substance Misuse Action Team (SMAT) as appropriate in exploring all funding opportunities including representation to the Welsh Assembly Government regarding the following:
  - the level of Substance Misuse Action Plan Funding allocated to the Vale of Glamorgan CSP.
  - the lack of long-term funding for developing and sustaining core services.

- the lack of funding for substance misuse prevention initiatives.
  - the lack of long-term funding for strategic posts that are key to driving through the substance misuse agenda and the local Substance Misuse Action Plan.
  - the lack of funding for treatment services.
- (ii) That Cabinet endorse clarification of the responsibilities of statutory commissioners and providers at both the national and local level with respect to substance misuse provision for young people within the transitional ages of 17 and 25.
- (iii) That the Leader of the Council make representation to WAG outlining the concerns in Recommendations (i) and (ii) above.
- (iv) That a shared vision and 'home-grown' strategy is developed for tackling substance misuse amongst young people in the Vale, with specific consideration given to addressing the needs of vulnerable groups such as looked after children, care leavers, young people excluded from schools, the homeless and the children of substance misusing parents.
- (v) That formal links are established between substance misuse and generic services for young people including youth services, education, housing, leisure, social and health services. Furthermore, that in 12 months time the Cabinet Member with Portfolio reports back to this Scrutiny on the progress made to date.
- (vi) That new arrangements are agreed in line with funding arrangements following the review of current joint arrangements with Cardiff for the provision of substance misuse services to young people in the Vale, or identifying new providers to deliver those services. Furthermore, that in 12 months time, the Cabinet Member with Portfolio reports back to this Scrutiny on the progress made to date.
- (vii) That the Welsh Assembly Government Performance Management Framework for Substance Misuse is implemented in order to secure significant improvements in the quality of data collection and reporting systems. The CSP and SMAT to make this a condition in Service Level Agreements with service providers. Furthermore, that the SMAT develops local performance measures and targets based on the national targets outlined in '*Tackling Substance Misuse in Wales: A Partnership Approach*' to evidence progress made locally.
- (viii) That a Substance Misuse Commissioning Group is established within the CSP as required by WAG guidance, membership of the Group to comprise the relevant expertise and knowledge required to undertake the role effectively. Furthermore that the Cabinet Member with Portfolio ensures this takes place by December 2005.
- (ix) That the Leader of the Council uses his influence to address the lack of representation from key partner organisations in relation to the Substance Misuse Action Team (SMAT).

<b>Section No.</b>	<b>Contents</b>	<b>Page No.</b>
	<b>Foreword</b>	<b>2</b>
	<b>Executive Summary</b>	<b>3</b>
<b>1</b>	<b>Introduction</b>	<b>8</b>
<b>2</b>	<b>Current Position</b>	<b>11</b>
<b>3</b>	<b>Findings</b>	<b>24</b>
<b>4</b>	<b>Notable Practice</b>	<b>26</b>
<b>5</b>	<b>Conclusions</b>	<b>29</b>
<b>6</b>	<b>Recommendations</b>	<b>31</b>
<b>Appendix 1</b>	<b>Scoping Template</b>	<b>33</b>
<b>Appendix 2</b>	<b>Baseline Assessment</b>	<b>36</b>
<b>Appendix 3</b>	<b>Equalities and Sustainability Issues</b>	

## 1. Introduction

- 1.1 The Community Wellbeing & Safety Scrutiny Committee has a responsibility to examine the work of the Council and its partners in the provision of services in the areas of Community Safety, Housing and Social Services in the Vale of Glamorgan. Its task is to actively promote improvement by testing the effectiveness of this work and to recommend ways in which greater benefit may be obtained for the community as a whole.

The review considered what was done locally to prevent substance misuse amongst young people in the Vale of Glamorgan and identified gaps in existing services. A number of recommendations have been made to the Executive in relation to improving what is done locally to achieve the desired outcome of reducing the incidence of substance misuse amongst young people in the Vale.

### 1.2 Substance Misuse

Substance misuse is a complex issue that not only impacts on the lives of those directly involved but also on their families and the communities in which they live. The term “substance misuse” used in the report describes the use of illegal drugs, or the improper use of alcohol, prescribed medication, over the counter medicines, volatile substances such as aerosols and glue. The Health Advisory Service (HAS) report 1996 defines substance misuse as ‘substance taking which harms health or social functioning’.

Interventions cover the four tier infrastructure as outlined by the HAS report, 1996. The structure was developed to ensure that both the low and high level threshold needs of young people are met in their local area. This ranges from universal education through to highly specialist provision. The four tier model of intervention described below is the defining feature of all work on young people’s substance misuse:

Tier 1: The essence of this tier is to ensure universal access and continuity of care to all generic services for young people and to identify and screen those with vulnerability. This involves improvement and maintenance of health, educational attainment and identification of any risks or child protection issues. It also involves engaging in the screening of any difficulties in relation to and of embedding advice and information concerning tobacco, alcohol and drugs. Tier 1 practitioners include teachers, voluntary agencies, social services, police, general practitioners and nurses in primary care.

Tier 2: This tier is the first line of specialist services offered by practitioners with some drug and alcohol experience and youth specialist knowledge. It is concerned with reduction of risks and vulnerabilities including reintegration and maintenance of young people in mainstream services for example return to school. Tier 2 practitioners include Child and Adolescent Mental Health Services, specialised voluntary youth services (one stop shops, generic counselling), paediatric and psychology staff, specialist social workers and youth offending team drug workers.



Tier 3: This tier deals with the complex and often multiple needs of the young person and not just with the particular substance problems. It involves re-integrating young people into their family, community and school, training or work and include non-medical interventions such as structured day programmes and community based drug treatment which attempt to tackle criminal and anti-social behaviour.

Tier 4: This tier provides specialist interventions and setting for a particular period of time and for a specific function as an adjunct to and a backstop for the services of the other tiers. Provision of services on discharge is usually organised prior to entry to these specialist services. Continuity of care including the continued involvement of tiers 2 and 3 workers pre, during and post admission is paramount. Interventions at this level include Forensic Child and Adolescent Psychiatry, substantial support for education and the continued involvement from substance misuse services at tiers 1, 2 and 3.

### 1.3 Terms of Reference

The review of substance misuse forms part of the 2005/6 planned work programme of the Community Wellbeing & Scrutiny Committee. Review scope and timescales were agreed by this Scrutiny earlier during the year. In line with the agreed work programme, the review commenced at the start of June and was completed in August 2005. The review process was supported by officers from the Improvement & Development Team and the Lifelong Learning & Education and Community Care & Health Directorates.

Appendix 1 of the report contains the completed scrutiny review scoping document and outlines:

- Objectives and purpose of carrying out the review including the desired outcomes.
- Specific work/topic areas to be covered.
- Evidence required, and if appropriate the people who will be interviewed.
- Visits to be undertaken where appropriate.
- Research to be undertaken.

### 1.4 Methodology

The review was carried out in line with the Council's Overview and Scrutiny methodology. Comprehensive guidance is provided with regards to the overview and scrutiny function in the Vale of Glamorgan including:

- Identifying issues for scrutiny review
- Scoping the review
- Collecting and collating evidence
- Final report

Following the scoping exercise, a baseline assessment was undertaken. This examined substance misuse services with regard to:

- Policy and Strategy,
- Current Service Provision,
- SWOT Analysis,
- Resources,
- Structure of Services,
- Partnerships,
- Customer Processes,
- Best Practice Initiatives, and
- Summary of Improvement Areas.

Appendix 2 contains the completed baseline assessment and provides a summary of key issues or areas for improvement identified through the assessment. It must be noted that a number of the improvement areas have funding implications which are out of the control of the Council, the Community Safety Partnership and its partners.

The main focus of the review was to consider existing services aimed at preventing substance misuse amongst young people, identify gaps in current provision and make recommendations to address these. It must be noted that due to time constraints detailed assessments could not be made at all levels and some areas were only considered where improvements were required (service delivery issues and service challenges).

## 2. Current Situation

### 2.1 The National Perspective - Wales

Local authority activity around young people and substance misuse sits within the national framework that is primarily shaped by the national drugs strategy, '*Tackling Substance Misuse in Wales: A Partnership Approach*' (2000). This reflects the overall aims and objectives of the government publication, '*Tackling Drugs to Build a Better Britain*' (1998).

'*Tackling Substance Misuse in Wales: A Partnership Approach*' has four key aims and specific objectives that relate to:

- Children, Young People and Adults
- Families and Communities
- Treatment
- Availability

The strategy clearly identifies the need for a partnership approach to address substance misuse at many levels; education and prevention, reducing demand and supply, treating substance misuse problems and addressing the needs of communities affected by substance misuse. The key features of the strategy include:

- Partnership
- Integration and co-ordination
- Evidence-base
- Proactive approach
- Accountability
- Long-term focus.

Key targets have been set by the Welsh Assembly Government (WAG) spanning the four main strands outlined in, '*Tackling Substance Misuse in Wales: A Partnership Approach*.' The targets are part of a longer-term plan to monitor and evaluate the strategy and will be added to or replaced as the knowledge base develops. The targets in relation to young people are as follows:

- To reduce the proportion of 11 to 16 year olds who report the use of illegal drugs and other substances by 4% by 2005;
- To stabilise and then reduce the proportion of 11 to 16 year olds reporting weekly consumption of alcohol by 2% by 2005;
- To increase the number of substance misusers participating in substance misuse treatment programmes by 70% by 2005 and 100% by 2008 (all groups);
- To increase the participation of offenders in treatment programmes which have a positive impact on offending by 66% by 2005 (all groups).

### 2.1.1 Complexities of Funding

A key challenge for substance misuse provision lies in securing longer term funding which will enable sustained development. There is an added challenge for the Vale of Glamorgan, as it is perceived to be relatively affluent and economically buoyant. Whilst there are several funding streams that support the commissioning and delivery of substance misuse services, a significant number of these funds are allocated on a short term or one-off basis. The funding streams include:

- WAG Substance Misuse Action Plan Funds
- Home Office Funding including Youth Justice Board and Recovered Assets Fund.
- Safer Communities
- Communities First
- The Local Health Board
- Local authority funding from Social Services and Education.
- Children and Young People Partnership
- South Wales Probation Service
- South Wales Police
- Building Safer Communities
- Safer Communities
- Objective 2 funding (linked to community initiatives)
- South Wales Fire Service
- Charitable bodies

WAG funding to tackle substance misuse is allocated through the Substance Misuse Action Plan Fund (SMAPF). The fund has grown from 1.5 million in 1999/2000 to over £11.2 million by 2007/2008. The SMAPF is distributed to the 22 Community Safety Partnerships (CSPs) throughout Wales, who have responsibility for administering the fund. The purpose of the fund is to help CSPs implement prioritised needs identified within local Substance Misuse Action Plans (SMAPs). The fund conditions require CSPs to achieve the following:

- An increase in the capacity of core treatment services;
- An improvement in the availability of treatment;
- Achieve a reduction in waiting time to access treatment;
- Expand services in place from April 2003 or as soon as possible thereafter.

The Substance Misuse Action Plan Fund also supports certain Voluntary Sector organisations providing substance misuse treatment services through Section 64 of the Health Services and Public Health Act 1968. This amounts to £325K a year. From 2007/08 the whole of this funding will transfer to CSPs for them to utilise against local priorities as detailed in each of their approved CSP SMAPs.

SMAP funding allocated to CSPs is via a funding formula based on five indicators that take into account alcohol prevalence, educational achievement and measures of multiple deprivation. The Vale of Glamorgan CSP was awarded £194,352 of SMAPF in 2004/5, the lowest in Wales. Subsequent funding up to 2007/8 is also amongst the lowest in Wales (2005/6 : £258,113.50; 2006/7 : £282,853.93; 2007/8 : £336,205.20).

The insecurity of funding for substance misuse services on the whole causes problems particularly in sustaining core services and in the recruitment and retention of staff. In addition, current funding does not appear to be realistic of actual costs of delivering services including employing appropriate staff, managerial and administrative support and developing appropriate infrastructure.

Service development appears to be driven by a multitude of funding streams, which often target specific priorities (including WAG priorities and targets) and have set criteria. Furthermore, whilst innovative services attract funding this often lasts just long enough for their effectiveness to be evaluated. Funding then appears to be redirected to other identified priority areas. This has meant that funding has not always gone where it is most needed in terms of local priorities and on the whole this has been detrimental to core service development and delivery.

Current funding for substance misuse services appears to be directed at provision for young people with substance misuse and criminal justice problems with funding for development of treatment services lower in comparison.

Overall, whilst the national strategy emphasises the importance of prevention, limited funding is allocated to the CSP to progress this area of work.

## 2.1.2 Complexities of Provision

Following the restructure of the National Health Service in 2003, responsibility for planning and implementing actions to tackle substance misuse at a local level rests with the 22 Community Safety Partnerships in Wales.

The complexities of funding highlighted previously are compounded by the fact that Community Safety Partnerships bring together representatives from a large number of statutory, independent and voluntary sector organisations involved in the prevention of substance misuse. In the Vale of Glamorgan this includes:

- Health (Vale of Glamorgan Local Health Board and Cardiff & Vale NHS Trust)
- Education Services
- Social Services
- Vale of Glamorgan Youth Offending Team
- Youth Services
- South Wales Police
- South Wales Probation Service
- South Wales Fire Service
- Representatives from provider agencies from the statutory, independent and voluntary sector.
- Various partnerships including the Young People's Partnership
- Service user representative (Drug & Alcohol Services)
- WAG Regional Office (Substance Misuse Advisory Regional Team)

Adding to this complexity is the current emphasis on broad and comprehensive preventative and treatment approaches to young people's services which means that a

service for one young person may include responses to substance misuse issues alongside a number of other interventions such as improving motivation, interests, developing basic numeracy and literacy skills, encouraging some educational skills or employment and addressing other related lifestyle issues such as offending, family conflict and peer influences. This also adds to the complexity of funding arrangements as provision covers a broad spectrum of interventions and services areas.

The Community Safety Partnership functions at a strategic level informed by a network of groups and sub groups. The Substance Misuse Action Team (SMAT) takes the lead on substance misuse issues and is responsible for delivering the aims of the agreed Local Substance Misuse Action Plan (LSMAP). There are currently two subgroups within the SMAT that support it in delivering the agreed action plan. The SMAT also operates as the Advisory Planning Group within the Vale of Glamorgan's Health and Social Care Joint Planning/commissioning structures. A representative from the Substance Misuse Advisory Regional Team (SMART) provides strategic support to the SMAT to assist in the delivery of the local substance Misuse Action Plan.

Planning and commissioning of services in the Vale is undertaken in line with WAG guidance and the framework for commissioning substance misuse services in Wales and covers the four-tier model of interventions highlighted in Section 1 of this report. The LSMAP has been informed by a preliminary needs assessment involving all key partners and providers of services within the Vale. It also takes into account the developments in strategic planning processes for children and young people at both the local and national levels. The LSMAP has key objectives directly relating to substance misuse prevention amongst young people and in commissioning, attempts to provide a balanced range of interventions covering the four-tiered model.

In recent years, WAG and Home Office funding and subsequently, service provision has largely targeted young people with substance misuse and criminal justice problems. Funding for treatment services is lower in comparison. There is a danger that if these services absorb resources that would normally go to all young people, this will result in a decrease in the general availability of services and users who do not fall within this category will have to wait longer to access services.

There is limited SMAP funding for preventative work in relation to substance misuse. Preventative initiatives undertaken within the Vale in the past two years have been funded largely through slippage funds from the SMAPF. Slippage in the last two years has occurred due to the length of time taken by WAG to agree the SMAPF. There are limited alcohol misuse services for young people in the Vale. A project funded across Cardiff and Vale does not equitably address the needs of young people in the Vale. Satellite services across the Vale are planned for the future through Pen yr Enfyf – a voluntary sector based service providing a range of services for people with alcohol related problems.

To date, allocation of funding and development of projects within the Vale CSP has been largely service provider led. Currently, there is no commissioning group established within the CSP to undertake the commissioning of substance misuse services although the partnership now has the budget and responsibility for this. In addition, a comprehensive analysis of needs has not been taken to inform service

development and provision. Whilst a preliminary exercise was carried out in 2004, this was limited due to the lack of baseline information. Service level agreements are currently being developed for all agencies commissioned to deliver substance misuse services. These will include performance measures and monitoring arrangements linked to WAG funding conditions. Furthermore, the introduction of a performance management framework for substance misuse in Wales will ensure information gaps are addressed. To ensure this, WAG has included the collection and reporting accurate performance information as a condition of SMAP funding.

The Community Safety Partnership is ideally placed (through its partnerships with local statutory, independent and voluntary sector organisations) and plays a key role in tackling substance misuse to provide better co-ordinated services within the Vale in the following areas:

- Work with school aged children and young people
- Provision for young people
- Involvement with community safety issues and youth offending programmes
- Social care and family support services
- Community and economic regeneration initiatives.

Young people with substance misuse issues may need to access the usual non-specialist services such as housing, employment, leisure, youth services and so on, to the more specialised counselling, detoxification all the way up to very specialist, intensive care packages. The Vale CSP takes into account the following local strategies to help ensure a more co-ordinated approach overall to substance misuse provision for young people in the Vale:

- Children and Young People's Frameworks
- Healthy Schools Initiative
- Health Challenge Wales
- Vale of Glamorgan Community Safety Partnership Strategy
- Vale of Glamorgan Health, Social Care and Wellbeing Strategy.

It must be noted that whilst there appears to be issues around the general level and length of funding for substance misuse as a whole, the lack of a cohesive, comprehensive multi-agency approach to substance misuse service planning and purchasing also has a negative effect on the impact of available funding.

### 2.1.3 Substance Misuse in Wales - Some High Level Facts:

The Health Behaviour in School-aged Children study (HBSC) is a cross-national research study undertaken every four years in collaboration with the World Health Organisation. The survey covers young people aged 11-16 years. The findings provide indicators of alcohol and drug use among young people in England and Wales. In the most recent survey, 50 schools from across Wales participated. Findings from the most recent study in 2000/01 include the following:

*Alcohol use:*

- 56% of 15 year olds in Wales reported drinking on a weekly basis compared to 52% in England and 43% in Scotland. At 15 years of age, approximately 58% of young males and 54% of young females in Wales reported weekly alcohol consumption.
- In Wales, the proportion of young people drinking on a weekly basis rises considerably between the ages of 11 and 15 from 10% of 11 year olds to 28% of 13 year olds and 56% of 15 year olds. A similar pattern emerges for England and Scotland. The gender gap increases with age and is most apparent among 15 year olds. This is the case for majority of countries taking part in the survey including England (60% young males compared to 49% young females), and Wales, although this difference is minor in Wales (58% of young males compared to 54% of young females).
- 59% of 15 year olds reported having been drunk on two or more occasions compared to 55% in England and 52% in Scotland.
- Across all countries and in all age groups, young males are more likely to report having drunk two or more times than girls, with the exception of 15 year old females in Wales who reported slightly higher rates of drunkenness than boys (60% compared to 58%).
- The study indicated that young people in Wales reported significantly substantially higher rates of regular drinking and drunkenness, than most European counterparts. For all age groups Wales and England have the highest rates of drunkenness, alongside Denmark and Greenland.
- In England, Scotland and Wales, 15 year olds reported drinking alcohol for the first time on average when they were about 12 and a half years old, and being drunk at an average age of 13 and half years old. However, young females in many European countries including England and Wales were on average a year younger than males when they first drank alcohol.

#### *Drug use:*

- For young people cannabis is the most widely used substance after alcohol and tobacco.
- 36% of 15 year old males and 32% of 15 year old females in Wales had used cannabis. These rates were lower than Scotland and England. 3% of 15 year olds in Wales reported being heavy users of cannabis (more than 40 times in the last year) compared to 6% and 7% in Scotland and England.
- 15.5% of 15 year old males and 26.8% 15 year old females in Wales reported weekly smoking, an indicator of regular smoking. This is less than in England (21.1% and 27.9% 15 year old males and females respectively). The proportion of young people smoking weekly rises from age 11 to 15. At age 11 slightly more young males reported being weekly smokers than young females. This is reversed by age 13 and this pattern remains at age 15.
- The proportion of young males in Wales who report ever smoking is 51%. The figure for young females is 65%. In addition the proportion of young people in Wales reporting that they have ever smoked rises steadily from 11 to age 15. More young females reported ever having smoked across all age groups, with the gap widening with age as more older females report having smoked.

A summary of trends in Wales from 1986 to the current survey reveal a changing picture in which initial increases in smoking and use of substances were followed by a



levelling off in young people undertaking these behaviours. Recent years have seen evidence of a small decline. Between 1996 and 2000, the numbers of 15 year-old girls smoking held steady at 29%. This figure dropped to 27% in 2000/1, which represents the first time a fall has been recorded, halting the steady rise in young girls smoking since 1988.

## 2.2 Local Perspective

The Vale of Glamorgan has a population of approximately 12,144 young people aged 11 to 18 years.

8 out of 22 electoral divisions in the Vale of Glamorgan are in the top 10% of least deprived in Wales, using the Index of Multiple Deprivation. Nine divisions fall within 10% and 40% least deprived. The five most deprived divisions (four in Barry) representing 25% of the population of the Vale were among the 40% most deprived in Wales.

Young people's substance misuse activity in the Vale is co-ordinated by the Vale of Glamorgan Community Safety Partnership (*Safer Vale Partnership*). The CSP is also responsible for producing the Young People's Substance Misuse Action Plan, as well as managing the funds for this activity and commissioning the services that will deliver the plan.

The Vale Substance Misuse Action Plan 2005-8 has been produced in line with the framework and guidance provided by WAG. The plan was informed by a preliminary needs assessment, which was carried out by OLM Consulting during 2004.

### 2.2.1 Substance Misuse in the Vale – Some Local Facts

Based on the 2002 HSBC study, the OLM report estimated that, 935 15 year olds in the Vale are drinking weekly with 985 having drunk more than twice. 50 Vale 15 year olds are heavy users of cannabis. The report also highlighted the fact that as alcohol use tended to increase with age there would be slightly more 16 year olds and less 14 year olds.

More recently the Young People's Partnership of the Vale of Glamorgan commissioned a young people's lifestyle survey, which collected information on 11 to 16 year olds. The findings were based on 4421 valid survey forms of which 3,837 were completed by young people who said they lived somewhere in the Vale of Glamorgan. Questionnaires were completed by all secondary schools in the Vale. Approximately 584 questionnaires were discounted either for errors in completion or for not residing within the Vale of Glamorgan. The Central Vale sample was 1,872 and the Rural Vale sample was 1,731. The national sample was 14,628.

The results enabled an assessment of current levels of youth crime, substance misuse and school age pregnancy. It also enabled an assessment of the relative prevalence at a local level of the risk and protective factors shown by research to influence the extent to which young people become involved in problem behaviours and outcomes. Risk and protective factors are found in all areas of young people's lives including their families, schools, communities and friendship groups.

Communities that Care (CtC) carried out the survey on behalf of the Vale of Glamorgan Young People's Partnership.

Overall, the results from the study indicated significant differences in the risk and protective factors faced by young people living in the Vale of Glamorgan when compared to the average young person in the UK. The report also identified significant differences according to the part of the Vale in which young people are growing up. Key findings from the survey in relation to substance misuse are as follows:

#### *Alcohol:*

- Young people in the Vale of Glamorgan are significantly more likely to drink alcohol regularly and in quite large quantities than are young people elsewhere in the UK. 11% of 11-13 year olds reported that they had ever been seriously drunk compared to 47% of young people aged 14-16. These figures are higher than the national figures. In terms of drinking alcohol the following were also identified:
  - 57% had drunk alcohol at least once in the past four weeks.
  - 32% had had 5 or more alcoholic drinks in a row in the past four weeks. The national figure is 29%.
  - 20% were regular drinkers, drinking at least once a week.
  - 32% had been seriously drunk at some time in comparison to the national figure of 28%.
  - Young people from the central Vale (34%) were significantly more likely than the rural Vale (29%) to say they had ever been seriously drunk.
  - Young people from central Vale were significantly more likely than young people from the national sample to say that they had ever been seriously drunk, that they had drunk 5 or more alcoholic drinks in a row sometime in the past four weeks.
  - Young people from the rural Vale were more likely to say they had ever drunk more than a sip or two of an alcoholic drink (82% rural, 76% national).

#### *Cigarettes:*

- 42% of Vale respondents said they had ever smoked a cigarette. This is 2% higher than the national figure. 36% had smoked before they were 13 and 17% had also smoked by the time they were 11. However, only 9% described themselves as regular smokers. A further 6% said they smoked 'now and then' while 8% said they had given up. 19% stated that they had 'just tried smoking once or twice'. In terms of smoking cigarettes the following were also identified:
  - Young people from the rural Vale (43%) were more likely to say that they had ever smoked a cigarette in comparison to the national figure of 40%.
  - Girls were significantly more likely than boys to say they had ever smoked a cigarette, had first tried cigarettes aged 13 or younger as to describe themselves as regular smokers.

#### *Drug use:*

- 23% of respondents said they had taken/used one or more of the illicit drugs mentioned in the survey. This ranged from 10% for 11-13 year olds up to 32% for 14-16 year olds. In terms of young people's experience of using drugs the following were also identified:

- 18% said they had used cannabis.
- 9% said they had sniffed glue, solvents, gas or aerosols.
- 1% of respondents said they had used cocaine or crack cocaine.
- 1% of respondents said they had used Ecstasy.
- 2% said they had used amphetamines.
- 2% said they had used magic mushrooms.
- 1% said they had used heroin.
- 18% said they had used cannabis.
- 1% said they had used barbiturates or tranquilisers without a doctor's prescription.
- 5% said they had felt out of control at some stage under the influence of drugs.
- 7% had sniffed glue or solvents at the age of 13 or younger.
- 10% had smoked cannabis at the age of 13 or younger.
- Young people from the central Vale were more likely than those from the rural Vale to say that they had ever used glues or solvents (10% compared to 7%) and to say that they had ever used amphetamines (2% compared to 1%).
- Young people from the rural Vale were more likely than young people from the national sample to report ever having used drugs, cannabis and ever being out of control on drugs.

The report highlighted a number of areas where there is a difference between the national and Vale samples. Young people in the Vale are more likely to say that they have ever used drugs (23% compared to 18%) that they have ever used cannabis (18 compared to 13%) or that they had ever felt out of control on drugs (5% compared to 4%). In addition 5% of young people say they had ever dealt or sold illegal drugs, which is slightly higher than the national figure.

*Young people's perception of the harmfulness of substances:*

- 53% of the Vale sample thought it very or quite likely that drinking one or two alcoholic drinks nearly every day would be harmful to a person.
- 75% thought that smoking 20 or more cigarettes a day for a lifetime was very or quite likely to be harmful compared to 78% of the national sample.
- 54% though it very or quite likely that smoking cannabis once or twice would be harmful compared to 60% of the national sample.
- 81% thought it was very or quite likely that smoking cannabis regularly would be harmful.
- Young people from the rural Vale were more likely than those from the central Vale to say that a person might harm themselves if they were to drink one or two alcoholic drinks nearly every day (55% compared to 51%), smoke 20 cigarettes per day (78% compared to 72%) or smoke cannabis regularly (84% compared to 78%).
- Girls were more likely than boys to say that a person might harm themselves by drinking nearly every day (56% compared to 49%) or by smoking cannabis (84% compared to 79%).

*Association between risk and protective factors*

The report also assessed the relevant prevalence of risk and protective factors shown by research to influence the extent to which young people become involved in these problem behaviours and outcomes.

The results of the survey suggests that the main strength of the Vale lies in the communities in which its young people live, which on the whole tend to be relatively affluent, well maintained and free from drug dealers, fights etc. The main area of risk identified was around the norms and behaviours of the peer group with which young people are mixing and indeed the report highlights that these risk factors are elevated above the norm. It also highlighted the need for improvement in the school domain where two out of four risk factors are elevated and one protective factor lower than average. In the area of the family, two risk factors are identified as being higher than the average and one protective factor lower. Understanding and identifying the risk factors will enable communities to focus on what they should do to ensure that young people get the best possible start in life and avoid getting involved in problems such as substance misuse. Protective factors hold the key to understanding how to reduce those risks and encourage positive behaviour and social development.

A summary of the mean scores for risk and protective factors is as follows:

- Risk factors such as a family history of problem behaviour, community disorganisation and neglect, low commitment to school appear to be higher amongst young people from the central Vale, whereas the availability of drugs is higher among young people from the rural Vale.
- Risk factors such as poor parental supervision and discipline, a family history of problem behaviour, low commitment to school, school disorganisation, attitudes condoning problem behaviour, alienation and lack of social commitment, early involvement in problem behaviour and peer involvement in problem behaviour appears to be higher amongst young people in the Vale when compared to the national sample. Availability of drugs, community disorganisation and neglect, was lower compared to the national sample.
- The protective factors of school opportunities for pro-social involvement and family attachment were higher in the national sample. School rewards for pro-social involvement appears higher amongst young people in the Vale when compared to the national sample.
- The protective factors of school opportunities for pro-social involvement, school rewards for pro-social involvement were higher amongst young people from the central Vale, whereas family attachment was higher amongst young people from the rural Vale.

### 2.3 Substance Misuse Services

The young people's element of the Vale of Glamorgan's Substance Misuse Action Plan is delivered via a number of distinct but linked 'services':

- The Community Safety Partnership
- School Support Officer
- Inroads Vale Drugs Project
- Option 2
- Brynffynon Child & Family Services
- Turning Point Vale Arrest Referral Scheme

- Whitchurch Hospital (Harvey Jones Unit)

#### *The Community Safety Partnership*

The Vale Community Safety Partnership operates various group and sub-groups to oversee elements of its work around young people's substance misuse. Of relevance here is the Substance Misuse Action Team (SMAT), which is responsible for monitoring the overall progress/performance including that of task groups set up to deliver the aims of the agreed action plan. The SMAT also operates as the Substance Misuse Advisory Planning Group within the Vale of Glamorgan's Health and Social Care joint planning/ commissioning structures. Representatives from the local authority Education and Social Services divisions, the Local Health Board, South Wales Police, South Wales Probation Services, South Wales Fire Service, the Local Medical Committee, Drug and Alcohol Services, WAG Regional Office (SMART) and service and provider agencies from the statutory, independent and voluntary sectors sit on the group. There are also links with key local strategic partnerships including the Young People's Partnership.

#### *School Support Officer*

The School Support Officer's role is to work in partnership with the Healthy Schools Co-ordinator, the Youth Service, Youth Offending Team, Inroads and South Wales Police to help develop a co-ordinated approach to substance misuse education for young people in the Vale. The role of the School Support Officer continues to be on a part time basis although evidence suggests increasing demand by schools for services. The following is undertaken as part of the role:

- Support for teachers, headteachers and school governing bodies on substance misuse education as it relates to the curriculum, school substance misuse policy and other activities designed to educate pupils about drugs and misuse of substances as a whole.
- Development of training packages including lesson plans and learning resources for schools tailored to suit their requirements.
- Parental/carer involvement in identifying substance misuse issues within respective schools. Training sessions are also offered to parents of pupils in schools.
- Peer education is currently being piloted.
- Development of prevention and diversionary workshops/initiatives for young people aimed at preventing substance misuse.
- One-to-one targeted support for pupils excluded from schools.

#### *Inroads Vale Drugs Project*

Inroads focuses on delivering harm reduction open access services for young people aged 13-25. The services delivered here generally fall within the tier 2 level of intervention as described in the HAS model. Where it is clear that a young person's needs demands more specialist packages of intervention, they will be referred to providers of tier 3 services at Brynffynon Child and Family Services. Examples of the services provided by Inroads include:

- Drop-in
- Assessment

- Counselling
- Crises intervention
- Targeted education based packages of intervention
- Telephone helpline
- Needle exchange
- Complementary therapies
- Carer support
- Specific work with vulnerable young people including Looked After Children and Young offenders.
- Mobile Outreach Service

### *Option 2*

The Option 2 project based at Haydock House, provides intensive support to families experiencing problems due to substance misuse to help them stay together. The service also considers the child protection issues relating to substance misuse within families and provides focused crises intervention, community based counselling, homelessness services, training services and a social work team. A referral - assessment - action plan - maintenance plan model operates for this service. It takes referrals for families where the risk is considered immediate (children at active risk of accommodation or registration) or where it is considered a future risk (deteriorating situation where accommodation or registration is a possibility if changes are not made).

The approach of the Option 2 team involves:

- Identifying risks, reflecting the fears and clarifying the actual behaviours that represent a risk to the children.
- Building on and supporting the resilience factors within the individual family members and the family as a whole.
- Recognising the natural resistance that will exist and working towards reducing it and its impact on the change process.
- Identifying all the resources within the family, the community and the relevant professional groups.

### *Brynffynon Child & Family Services*

The service provides a tier 3 level substance misuse service for young people aged 11 to 17 years old. Interventions are tailored to suit the individual's needs following a thorough assessment process and development of a care plan. Therapeutic interventions provided include:

- Detoxification, maintenance and psychotropic medication.
- Cognitive behavioural therapy to look at the thought processes and actions of young people that may lead to negative behaviours.
- Family therapy designed to work with families with young substance misusers to overcome difficulties that are impacting negatively on the young person.
- Family work/parenting skills, which involves giving advice to carers/parents on strategies for effectively managing challenging, risky or dangerous behaviour.
- Relapse prevention/ social skills training includes sessions covering, coping with cravings, coping with high risk situations, planning for relapse, managing stress, coping with conflicted evolving social support, anxiety management.

- Drug and alcohol education emphasising abstinence and harm minimisation as it is recognised that abstinence is not always possible.
- Pregnant young girls.

#### *Turning Point*

Turning point recently took over the Arrest Referral Scheme operating from Barry Police Station. The voluntary scheme aims to identify problematic drug users at the point of arrest and encourage them to tackle their drug problem via an assessment and onward referral to appropriate specialist services.

#### *Whitchurch Hospital, Harvey Jones Unit*

The service provides intensive in-patient treatment for young people at the Harvey Jones Unit. The tier 4 level service involves complicated detoxification, crises management, containment and care/ child protection issues. Referrals are received from the tier 3, Brynffynon Child and Family Services. At this level, there is continued tier 3 multi-agency involvement alongside tiers 1 and 2 substance misuse services.

### 3. Findings

The findings of the review are as follows:

- The information available on the subject matter suggests that substance misuse is on the increase amongst young people in the Vale. It is however difficult to arrive at an accurate picture of the prevalence amongst young people locally due to the general lack of baseline information. This appears to be consistent with the national picture, which is largely made up of estimates based on surveys.
- WAG SMAP funding allocated to the Vale CSP is among the lowest in Wales. Furthermore, the limited funding is directed to achieving WAG priorities as per funding conditions.
- Current funding for substance misuse does not appear to be realistic of actual costs of delivering services including employing appropriate staff (on longer term contracts), managerial and administrative support, and the development of appropriate infrastructure.
- A comprehensive assessment of need has not been undertaken in relation to substance misuse services for young people in the Vale. Whilst a preliminary assessment of need for all services (adult and young people) was undertaken during 2004, this was again limited by the lack of baseline information to inform the process. In addition services on the whole do not appear to routinely collect data on the clients accessing their services. This is likely to have an impact overall on the effectiveness of resource allocation, planning, commissioning and delivery of services.
- Innovative substance misuse prevention work is being undertaken within schools and in various locations across the Vale through established links between the Education Service, the Youth Offending Team, the Youth Service and South Wales Police.
- There is generally a great deal of commitment amongst providers and commissioners, to tackling substance misuse problems in the Vale. There is also a great deal of expertise and knowledge.
- Whilst the Option 2 service (provides intensive support for families coping with a substance misuse problem) is considered notable practice, current demand for the service far outstrips supply.
- The Vale Community Safety Partnership does not appear to give substance misuse the priority it deserves. It is felt that a lack of understanding of the issues around substance misuse contributes to this.
- Substance misuse services provided in partnership with Cardiff do not appear to be equitable in relation to Vale residents. Furthermore, key decisions around service set up and delivery appear to be taken by Cardiff with limited reference to the needs of Vale residents. Satellite clinics within the Vale are limited and Vale clients usually have to go to Cardiff.
- The review identified the need for a shared vision and 'home grown' strategy for substance misuse in the Vale taking into account both local and national priorities. It also highlighted the fact that WAG funding is directly targeted at achieving its priorities and these are not always the same as identified local priorities.



- Funding for service development is limited and largely short-term. Furthermore, the multitude of funding streams appears to drive the direction of service development as a whole, as any secured funds are again targeted at particular priority areas and have set criteria. Whilst innovative services attract funding this often lasts just long enough for their effectiveness to be evaluated. Funding then appears to be redirected to other priority areas. This is to the detriment of core service development and delivery overall.
- There is currently no Commissioning Group established within the CSP to undertake the role of service planning and commissioning for young people, although this responsibility and the budget for substance misuse is now held by the Vale Community Safety Partnership.
- Performance management appears to be limited. There is lack of consistent and quality data to inform service planning and commissioning. The recent introduction of the WAG led performance management framework is likely to improve performance data in the future, particularly as the SMAPF conditions now include the collection and reporting of accurate performance data as a prerequisite.
- There appears to be limited tier 2 preventative services targeting identified vulnerable groups such as the homeless, looked after children, care leavers, young people excluded from schools and children of substance misusing parents.
- Both WAG and Home Office funding is directed at provision for young people with substance misuse and criminal justice problems. Funding for treatment services is now lower in comparison. It is therefore likely that young people who do not fall within this category will have to wait longer for services.
- There is limited funding to undertake prevention initiatives. Work undertaken in the Vale is usually via SMAPF slippage funds.
- A limited presence of substance misuse services for young people in the Western Vale and Penarth was identified.
- There are limited alcohol misuse services for young people in the Vale.
- The links between substance misuse services and other generic services such as youth services, leisure, employment and housing need to be strengthened.
- Clarification is required, at both the local and national level, of the responsibilities of commissioners and providers with respect to provision of substance misuse services for young people between the transitional ages of 17 and 25. At present different age groups are applied by the Education Service, Social Services and Health services as determined by various legislation guidance.
- Longer term funding has not been secured for a number of key strategic posts that support the work of substance misuse in the Vale. Examples include the Vale Substance Misuse Co-ordinator and the School Support Officer. The post of School Support Officer is on part time basis although the support required by schools is of a sufficient level (demand for services) to warrant a full time equivalent. This is likely to impact on the retention of staff, key to driving forward the local substance misuse action plan.
- There is a lack of representation from key partner organisations at the SMAT and at task group level. This appears to have had an impact on the ownership of the local substance misuse action plan.

#### 4. Notable Practice

As part of the review, research was undertaken to identify notable practice elsewhere. A significant number of local authorities in partnership with local statutory, independent and voluntary organisations have introduced initiatives aimed at preventing and minimising substance misuse amongst young people. A summary of these initiatives are highlighted below:

##### *Beacon authorities*

The beacon authorities for substance misuse demonstrated the following notable practice:

- Effective partnership arrangements in identifying need, planning and commissioning appropriate services. Young people have an opportunity to input into this process via a variety of means including young people's reference groups.
- Pooled budget arrangements are in place to improve effectiveness of planning and commissioning of services. This has a knock on benefit in terms of sustaining core services.
- Joint commissioning group established for young people's services.
- Community based open access services for young people providing a variety of interventions ranging from tier 1 to 3, usually all three. This is usually via a one-stop shop approach.
- Substance misuse programmes are based on identified need of young people and are culturally relevant and evidence based.
- There are local protocols in place supporting transition through critical points, such as moving between schools and leaving care.
- Substance misuse policies and programmes are available in all schools. Each school has identified staff with responsibility for substance misuse education and this is communicated to all, including parents and the LEA. Training is provided to all schools to help manage drug related incidents. In addition, all school-based staff are given drug awareness training and this is ongoing. Parents of school pupils are also offered this training. Substance misuse education is monitored and evaluated and pupils are surveyed on a two yearly basis via a lifestyle survey.
- A directory of substance misuse services for young people is available and updated annually. This is provided to all schools.
- Primary prevention programmes such as universal and targeted education (higher risk young people) is multi-agency led and much emphasis is placed on appropriate training at all a levels. Substance misuse education in schools involves innovative diversionary projects to engage all pupils including peer approaches.
- Secondary prevention is also multi-agency led with emphasis on harm reduction initiatives. This targets the most vulnerable young people including those identified by the national strategy and by professionals. The aim of interventions here is to delay the onset of experimentation and to ensure behaviour and patterns of use are managed in ways that try to reduce risk and potential harm. Intensive life-skills programmes are in place.

On the whole, whilst all the authorities researched undertook substance misuse education as part of the curriculum, some have done so in more innovative ways in order to engage young people. Initiatives range from general information and advice sessions, peer education through to diversionary activities in a variety of areas that encourages young people to be creative. For example, producing a music video with

a substance misuse message from start to finish and having control of the process as a whole. Other examples include organising various youth specific events from start to finish, highlighting the substance misuse message.

Out of the school environment, a significant number of authorities undertake education through youth services e.g. youth clubs, youth forums, social clubs and various youth events. In rural areas, mobile outreach units are also used to target areas frequented by young people. Broader youth programmes aimed at personal development usually involving a variety of schemes such as sports, performing arts etc. are also targeted to provide information, and advice.

Particular attention is paid by some authorities on targeting local hot spots and key groups of young people who may be vulnerable to substance misuse. This is enabled by the availability of comprehensive baseline data on local need. Projects introduced by some authorities to target young people at risk include, outreach and detached work, developing skills for example, developing coaching skills in a range of sports, establishing sports clubs, youth achievement awards, leadership and mentoring projects, opportunities for volunteering, casual and part-time work. National projects such as Positive futures in England target the worst drug-affected areas with the aim of creating opportunities for young people to prevent them going down the same path. Connexions in England, provides similar projects although these target a wider audience of young people.

The majority of authorities researched undertook some education for the parents of school going children. They usually took the form of awareness-raising sessions including advice on how to detect the signs of misuse, prevention and coping skills etc. Parents are also given the opportunity to inform education programmes in schools.

A significant number of authorities have established formal links with generic services such as housing, employment, youth services, leisure, social and health to ensure that young people with substance misuse issues have access to the appropriate services to support their personal development and wellbeing. These links are supported by local agreements some of which are informal.

Some authorities have developed integrated substance misuse services and created pooled budgets to improve effectiveness of planning, commissioning and access to services, particularly treatment services, which are more accessible via a one-stop shop approach. The added knock on benefit is more sustainable core services, particularly in view of the funding issues highlighted throughout this report. Information sharing and monitoring of trends is also enhanced and this informs service development. Continuity of service is also enhanced particularly with young people within the transitional ages. Two examples of integrated services are highlighted below:

Bolton has developed an integrated community substance misuse team to address young people's substance misuse needs. The team comprises workers covering tiers 2/3 and 4 services. The service links up with the Youth Offending Team, which also provides some tier 2 interventions and a Schools Drug worker providing tier 1 services and education. The service is jointly funded by the local authority, Health and the Youth Justice Board.

In Oldham, the Alcohol and Substance Intervention Service (Oasis) integrates both voluntary and statutory services to offer young people across the borough a variety of accessible services ranging from information and advice through to care planned intervention for more serious substance related needs. Services can be accessed directly by young people, agency workers, parents/carers and any other person who would like information, advice consultation and support. Services are funded jointly by the Youth justice Board, local authority, Department of Health, DfES and via SRB and lottery funding. The service provides interventions covering all four tiers.

Research undertaken to date identified a number of key principles to effective substance misuse prevention programmes for young people. They include the following:

Building a strong framework:

- Address the protective factors, risk factors with focus on the factors that most directly contribute to substance use problems.
- Tie activities to complementary efforts by others within the community for a holistic approach.
- Ensure sufficient programme duration and intensity with age appropriate services covering adolescence and young adulthood. Intensity needs to increase as the risk of participants increases.

Accountability:

- Base prevention programmes on accurate information that is, local information on the nature and extent of young people's substance misuse, problems associated with use and user characteristics.
- Establish clear and realistic goals that address local circumstances.
- Monitor and evaluate substance misuse programmes to ensure that they are in line with the desired outcomes.
- Address programme sustainability from the beginning.

Understanding and involving young people:

- There is a need to see substance misuse issues within the context of the stages of young people's development in order to respond to it effectively.
- Recognise young people's perceptions of substance misuse in order to create credible programmes.
- Involve young people in designing and implementing substance misuse programmes.

## 5. Conclusions

The review highlighted some excellent work being carried out locally to prevent substance misuse amongst young people in the Vale. Overall, the Community Safety Partnership and local partner agencies have made a good start in tackling the key objectives within the Local Substance Misuse Action Plan, however, a number of areas have been identified where further attention is required to support improvements in the effectiveness of provision for young people across the Vale:

Whilst there are a number of innovative projects in place, the lack of longer term funding for substance misuse services is likely to have a negative impact on the sustainability of current and future services. Furthermore, partnership working relies on the working relationships between individual workers and while many of the key posts within substance misuse continue to be funded on a short-term basis, partnership working will remain fragile. There is a need to explore all opportunities to overcome the short-term provision of services including making representations to the WAG to provide longer-term funding for the development of core services. Furthermore in light of the fact that substance misuse funding for the Vale is amongst the lowest in Wales, representations should be made to WAG regarding this matter.

Wider understanding and ownership of the substance misuse issues within the CSP has not yet fully developed and this places a strain on the limited resources supporting services, particularly as the CSP has responsibility for the budget and commissioning. Furthermore ownership and commitment from partners to tackling substance misuse issues would benefit from the development and agreement of a shared vision and 'home grown' strategy for the Vale which takes into account both local and national priorities.

Targeting the hard to reach and high-risk vulnerable young people is crucial and this requires good co-ordination backed by sufficient resources. This has knock on benefits in reducing demand on more complex services. Commissioning also needs to consider service provision in the rural areas of the Vale, which is currently inadequately served.

Whilst there are some links established between substance misuse and generic services such as youth services, housing, employment and leisure, these need to be strengthened. In addition, links to young people's social and health services also need to be strengthened.

Responsibility for provision of services to young people between the transitional ages of 17 and 25 needs to be clarified at both the national level and local level. Local protocols will improve accessibility to and continuity of services.

An examination of arrangements for substance misuse services provided by Cardiff on behalf of Vale residents is required to address the perceived lack of equity in provision.

There is a general lack of baseline information including data on services to accurately inform the commissioning of services. It is hoped that the recent introduction of the WAG led performance management framework will go some way

to addressing this issue particularly as this is now one of the conditions of the SMAPF.

WAG funding for treatment services is below that of criminal justice substance misuse related services. There is a need for an increase in funding if the lack of treatment services is to be tackled.

It is acknowledged that the best solution to the substance misuse problem is to stop young people starting substance misuse. Whilst innovative substance misuse work is taking place within schools in the Vale there are limited WAG funds to support this in the long term. In the past two years initiatives undertaken have been funded via slippage in the SMAP fund. This will not always be the case. As a key priority for the Vale, there is a need explore all opportunities including representation to WAG about the value of prevention initiatives.

## 6. Recommendations

The recommendations have taken into account issues identified during research, discussions with specialist officers and the substance misuse baseline assessment. The recommendations identified below are split into two areas, those that need to be addressed at a national level via Welsh Assembly Government and those that may be addressed locally between the Council and its partners via the Community Safety Partnership. The national issues have significant funding implications that cannot be addressed at the local level.

Cabinet is requested to consider and approve each of the following Community Wellbeing and Safety Scrutiny Committee recommendations in relation to substance misuse services for young people in the Vale:

- (i) That Cabinet support the Community Safety Partnership (CSP) and the Substance Misuse Action Team (SMAT) as appropriate in exploring all funding opportunities including representation to the Welsh Assembly Government regarding the following:
  - the level of Substance Misuse Action Plan Funding allocated to the Vale of Glamorgan CSP.
  - the lack of long-term funding for developing and sustaining core services.
  - the lack of funding for substance misuse prevention initiatives.
  - the lack of long-term funding for strategic posts that are key to driving through the substance misuse agenda and the local Substance Misuse Action Plan.
  - the lack of funding for treatment services.
- (ii) That Cabinet endorse clarification of the responsibilities of statutory commissioners and providers at both the national and local level with respect to substance misuse provision for young people within the transitional ages of 17 and 25.
- (iii) That the Leader of the Council make representation to WAG outlining the concerns in Recommendations (i) and (ii) above.
- (iv) That a shared vision and 'home-grown' strategy is developed for tackling substance misuse amongst young people in the Vale, with specific consideration given to addressing the needs of vulnerable groups such as looked after children, care leavers, young people excluded from schools, the homeless and the children of substance misusing parents.
- (v) That formal links are established between substance misuse and generic services for young people including youth services, education, housing, leisure, social and health services. Furthermore, that in 12 months time the Cabinet Member with Portfolio reports back to this Scrutiny on the progress made to date.
- (vi) That new arrangements are agreed in line with funding arrangements following the review of current joint arrangements with Cardiff for the provision of

substance misuse services to young people in the Vale, or identifying new providers to deliver those services. Furthermore, that in 12 months time, the Cabinet Member with Portfolio reports back to this Scrutiny on the progress made to date.

- (vii) That the Welsh Assembly Government Performance Management Framework for Substance Misuse is implemented in order to secure significant improvements in the quality of data collection and reporting systems. The CSP and SMAT to make this a condition in Service Level Agreements with service providers. Furthermore, that the SMAT develops local performance measures and targets based on the national targets outlined in '*Tackling Substance Misuse in Wales: A Partnership Approach*' to evidence progress made locally.
- (viii) That a Substance Misuse Commissioning Group is established within the CSP as required by WAG guidance, membership of the Group to comprise the relevant expertise and knowledge required to undertake the role effectively. Furthermore that the Cabinet Member with Portfolio ensures this takes place by December 2005.
- (ix) That the Leader of the Council uses his influence to address the lack of representation from key partner organisations in relation to the Substance Misuse Action Team (SMAT).



