



# Executive Summary CORNWALL AND ISLES OF SCILLY Young People's Specialist Substance Use Treatment Needs Assessment

*Building services around the needs of children & young people*

## Executive Summary

This work has proceeded in accordance with National Treatment Agency (NTA) 'Guidance to inform local Children and Young People's Planning Processes'. The findings of this Needs Assessment will form the basis of the local Young Persons' Treatment Plan and the specialist substance misuse treatment component of the Children and Young People's Plan for 2012/13. It is a working document and aims to provide a foundation for an ongoing process of service development and delivery based on identified local needs, setting targets in relation to drug treatment and harm reduction services that contribute to the wider service provision for young people in Cornwall.

The contents of the 2011/12 Young Persons' Substance Use Treatment Plan formed the basis of the substance use component of Cornwall's Safeguarding Improvement Plan. The areas identified under this plan have now been addressed and in subsequent inspections, there have been no specific recommendations in relation to Young Persons' Substance Misuse Services in Cornwall. As a result of the work undertaken in this area, the following outcomes have been achieved:

- Review, redesign and commissioning of Substance Use Awareness and SUST training with a new training programme being launched in February 2012
- Dramatic reduction in the number of young people aged 18 and over in Young Persons' Substance Misuse Services and jointly planned/managed transitions for those with particular vulnerabilities, into adult services
- Improved links and joint working with the Health Promotion Service, including Healthy Schools and the Young Persons' Alcohol and Drug Worker, and the development of a co-ordinated multiagency plan to provide support for, schools around substance misuse, including alcohol in line with National Institute for Clinical Excellence (NICE) guidelines, including expanding support for parents and practitioners
- Joint commissioning of Breaking The Cycle project targeted at work with families affected by substance misuse, building on the 'whole family' approach and strengthened links between parenting and substance misuse support programmes
- A continued reduction in the average time that young people spend in specialist treatment services towards the regional and national averages
- The embedding of Young Persons' Substance Misuse workers in locality structures to facilitate an integrated approach to meeting the needs of young people accessing specialist treatment services
- Improved performance against NTA key performance indicators

This progression allows the partnership to focus on the next stage of development to further improve the efficiency and effectiveness of Young Person's Specialist Substance Use Treatment Services in Cornwall and to continue effective working with wider Children's Services to improve early intervention and prevention services in relation to drugs and alcohol.

The following needs assessment identifies the areas where the evidence suggests that Cornwall still has areas of unmet need. These are structured into 4 sections for analysis, the key findings of which are summarised below. These will form the basis of the Young Persons' Substance Use Treatment Plan for Cornwall in the 2012/13 financial year and beyond.

### Early Intervention and Prevention

- Evidence suggests that a significant proportion (over a quarter) of young people in schools still feel that they need better information and advice in relation to drugs, alcohol and smoking, echoed by the Youth Manifesto.
- Rates of young people reporting that they had previously had an alcoholic drink were higher than national and statistical neighbours' rates (51% compared to 42% and 48% respectively), with 19% reporting having been drunk once or more in the previous 4 weeks (from Tellus4 survey). 10% of young people indicated that they had previously taken illegal drugs.

- This evidence suggests a continued need to work in partnership with schools and other youth provision to ensure a robust and evidence-based effective range of early intervention and prevention work in Cornwall.
- Information regarding social deprivation and health needs, combined with evidence linking these factors with the risk of young people developing problematic substance use, suggests that services may need to target particular geographical areas in terms of early intervention/ prevention initiatives. For example, areas of the Camborne, Pool, Redruth locality feature with high levels of deprivation, as do parts of Falmouth, Penzance and St Austell localities. Levels of parental substance and alcohol use from the health needs assessment undertaken by the Cornwall and Isles of Scilly Primary Care Trust, indicate high levels in areas including Camelford, Penzance, Callington, Liskeard and St Austell/Clays areas.
- Whilst direct cause and effect predictions cannot be drawn from this data, it does indicate potential levels of need. Furthermore, when cross-referenced with information on CAF initiations, it appears that need in relation to young people's and parental substance misuse is still under-recorded or simply not recognized. Improvement is evident between the 2009/10 and 2010/11 years, in that:
  - between April and December 2011, YZUP workers initiated 5 CAFs (compared to none for the same period in 2009/10)
  - Young People's substance misuse was recorded as the main trigger for 1 CAF and an additional trigger for 6 CAFs (compared to 1 overall during 2009/10)
  - Family substance misuse was recorded as the main trigger in 2 CAFs and an additional trigger in 15 CAFs (compared to 1 overall during 2009.10),However, further work is needed in raising awareness in locality and multi-agency teams regarding the impact of parental substance use on young people's outcomes and recognizing young people's substance use more effectively. Extensive training programmes through the DAAT looking at both these elements will be essential in supporting practitioners across disciplines to recognize and take appropriate actions in relation to these areas in the future. The picture in Cornwall of young people entering treatment services with an existing CAF is that numbers are lower than may be expected, reflecting both regional and national rates.

## **Vulnerable Groups**

- Evidence regarding hospital admission rates for young people under the age of 18 with alcohol related conditions have decreased in recent years but are still of concern locally. In addition, links are being made with hospitals in Plymouth as traditionally, young people from the east of the county would be admitted either to Derriford or Barnstaple hospitals rather than Treliske where the majority of development work regarding referral pathways has taken place to date.
- Levels of substance use of children and young people in the care of the local authority appear to be dropping but it is not clear whether this is due to genuine levels of need decreasing or issues around the consistent recognition and recording of these needs. Further work with the Children's Social Work Service to establish accurate levels of need through embedding screening as part of assessment processes and ensure that young people in care have access to early intervention, prevention and specialist services will remain a priority for the coming year.
- Close partnership working with the Youth Offending Service in Cornwall has resulted in increased referrals of this vulnerable group into Specialist Substance Use services over the course of the year. However, data from assessments relating to risk factors underpinning young people's offending indicates that there is still work to be done to ensure effective and timely early intervention and prevention is undertaken and to ensure that those with higher levels of need are referred to specialist services. Where there is evidence that those services appear to be ineffective in reducing this risk factor, lessons from this must be used to further improve both specialist services and the multi-agency holistic approach which is required where substance use features as just one of a range of

multiple issues impacting on young people's offending behaviour and their long term outcomes.

- Housing and homelessness remains an issue for vulnerable young people evidenced through the Sector Review, data from Careers South West (showing a year on year rise of those reporting accommodation issues to 517 during 2010/11 compared to 479 during 2009/10). Young People with substance use issues and caseload information suggests that this area of need is staying relatively stable. The majority of young service users were living with relatives at triage, consistent with previous years, with 12 young people living in unsettled accommodation and 5 reporting having No Fixed Abode. It should be noted that it is often those young people with the most chaotic lives and a combination of more complex needs who are disproportionately affected by this. Housing continues to be an area of focus through the Housing and Homelessness Joint Commissioning Group which will be fundamental to the redesign of young people's housing and homelessness services in partnership with Adult Care and Support over the coming 12 months.
- Referrals from and joint working with CAMH Services is still under development. In some areas of Mental Health services, links are well developed and young people with 'dual diagnosis' are worked jointly between the specialist services through joint care planning and interventions. In other areas, there is still a need to develop this further in order to ensure that young people are receiving appropriate, effective and timely services. This will be an area of focus in the coming year as changes to the Specialist CAMH Services, and the development of a Comprehensive CAMHS Needs Assessment and Strategy for Cornwall are at a stage where joint working has the opportunity to be embedded in a consistent, effective and permanent way. This can be supported further by the development and implementation of common performance indicators across the services which will provide information on the effectiveness of joint working between mental health and substance use providers in Cornwall.

### **Specialist Treatment**

- Numbers of young people accessing treatment have consistently shown rising levels between 2007 and 2010 but this trend has reversed during 2010/11, in line with regional and national patterns. 168 young people under the age of 18 engaged in treatment through YZUP during 2010/11 compared to 184 during 2009/10. National engagement rates have also seen a corresponding drop. Cornwall has seen a 23% drop in numbers in treatment between 2009/10 and 2010/11. There has also been a drop in referral rates from 134 in 2009/10 to 71 in 2010/11, a reduction of 43%. Initial evaluations show that there has been a national drop in referral rates but Cornwall has fared particularly poorly. This is partially reflective of focused transitions work for those aged over 18 who were previously in young persons' treatment services but may also indicate a need to ensure swift, consistent and effective early intervention approaches as well as clear pathways into services, particularly from Social Work and Youth Offending Services. This will be addressed during 2012/13 through increased SUST training and focused work with Children's Social Work Service, YOS and Integrated youth delivery in localities.
- The gender split for young people in treatment is fairly equal with males making up 56% and females making up 44% of the cohort, an identical picture to 2009/10. Central Cornwall has the greatest number of service users with notable clusters in Falmouth and Newquay. There is also a considerable number of young people situated in the St Austell and China Clay areas that have engaged with treatment.
- The vast majority (89%) of young people received some kind of structured psychosocial intervention with a small proportion also receiving harm reduction (5%), family work (1%) or pharmacological (substitute prescribing, 4%) interventions. There were no young people accessing residential treatment in 2010/11. This is broadly comparable with the profile for the 2009/10 year.
- 58% of young people (98) in treatment were aged 16 or above at the time of triage. This is a reduction of 6% compared to the previous year where 65% (158) were aged over 16

at triage. 7% (13) were aged 13 or younger at triage, which is consistent with 2009/10 information.

- The profile of substance use of those accessing treatment indicates a higher use of cocaine, ecstasy and amphetamines than the regional average, consistent with last year's profile. The most common primary substances for service users of all ages are cannabis (43% or 72 young people) and alcohol (33%, 55). Compared with 2009/10, there was a substantial rise in service users presenting with primary alcohol problems whereas those having primary cannabis problems remained constant. However, the numbers reporting alcohol as a second or third problem substance remained consistent with 2009/10 at 78%. A reduction in those young people presenting as problem drug users (i.e. opiate and crack users) reduced to less than 5 during the 2010/11 financial year (compared to 8 during 2009/10), none of whom were injecting. This is consistent with national patterns.
- 2010/11 data indicates that Children and family services and YOT referrals are the most common routes into treatment with Children and family service referrals 8% higher than the national rate. YOS referrals are 11% lower than the national rate although there has been a 4% rise in Health and Mental Health referrals since 2009/10 and this rate is 5% above the national rate. Self/Family referrals are 2% higher than the national rate. Whilst LAC referrals are twice the national rate, this represents 3 Children in Care who have been referred to the service which is significantly lower than might be expected given that Cornwall has approximately 400-450 Children in Care at any one time. The issues raised by referral patterns will be addressed through the targeting of SUST training and partnership action plans with the Children's Social Work Service, Youth Offending Service and Integrated Youth Services.
- There were 82 treatment exits in 2010/11 with 92% successfully completing their care plans, compared with 48% successful completions during 2009/10, meaning that the percentage of successful completions in Cornwall and the Isles of Scilly are higher than the national average. The percentage of those completions where the young person is drug free has increased by 17% between 2009/10 and 2010/11, now being 85% above the national rate. The percentage of completions where the young person reports occasional use has increased by 27% between 2009/10 and 2010/11 and is 11% above the national rate. The rate of unplanned and unknown discharges from the service are significantly lower than the national rate and show substantial improvement from 41% during 2009/10 to 7% in 2010/11, compared with a national rate of 19%.
- Independent casework audits have noted an improved quality of care planning and improved practice regarding the timeliness of care planning and reviews has improved significantly. Areas for further work include increased harm reduction work regarding Blood Borne Viruses, improved after care planning and meeting all care planning goals at treatment exit. Exit reviews are now being consistently completed with service users at treatment end and feedback will be reviewed by the service and the service-user group, which has now been established, contributing to this needs assessment and further service improvement priorities.
- Historically, approximately half of the young people engaged with the Young Person's service have been 18 years old and over. The percentage of those aged 18 or over reduced to 25% during 2009/10 and at the year mid point for 2011/12 (September 2011), had further reduced to approximately 15% of the young people's treatment population. This is the result of focused transition work with young people aged 18 and over. Of the 25 young people aged 18 or over who completed treatment with YZUP in 2010/11, 23 were discharged from the service and 2 were referred onto, and triaged through adult treatment providers.
- During 2010/11 there were 7 young people who had a CAF at treatment exit, 3 of which had a CAF at triage. The completion rate for fields which make up the NTA complexity index is not sufficiently high to give confidence in interpreting the results. This is mainly due to the case recording system that was used during that year having significant

limitations, which have now been addressed by the introduction of a new system but it is expected that the benefits of this will only become evident in relation to 2011/12 data.

### **Families with Complex Needs**

- The term 'Toxic Trio' has been used to describe the issues of domestic abuse, mental ill-health and substance misuse which have been identified as common features of families where harm to children has occurred. They are viewed as indicators of increased risk of harm to children and young people and featured in nearly three quarters of serious case reviews examined in a study (Brandon et al, Understanding Serious Case Reviews and their Impact). Therefore, the importance of addressing these issues within a family context in order to improve outcomes for young people cannot be underestimated.
- When the needs of parents identified as having substance use issues or data on adults with children accessing Adult Treatment Provision are considered, figures indicate a potential impact of adult activity on a total of 1,421 children and young people (608 living in households where one of more parent uses substances, 813 living in households where one or more parent abuses alcohol). Further evidence through Adult Treatment provision indicates that these levels are fairly accurate.
- During 2010/11 there were 974 service users in specialist adult drug and alcohol treatment who were recorded as parents, with 45% of those (440 adults) having children living with them. 60% of the total number of parents are in treatment for primary drug use, of which nearly two thirds (346) have heroin identified as a primary substance. Postcode sectors with highest rates of parents in treatment are situated in or around Bodmin, Penzance, Newquay and Liskeard. With the exception of Liskeard, these areas are synonymous with the young people's treatment population.
- When comparing CAF data with the numbers of families identified through the CIOS Health Needs audit and adult treatment population data, there seems to be a significant gap between the numbers in treatment with children and the numbers being subject to a CAF. Whilst not all of those in treatment will require additional multi-agency support, it's reasonable to assume a proportion of them will. It is also reasonable to assume that a proportion of referrals into the Children's Social Work Service will be related to parental substance use as a significant risk factor
- Areas with the highest rates of domestic abuse where the child is resident tend to be in and around the urban centres of Cornwall, with the main hotspots (LSOAs) being in Redruth, Hayle, Penzance, Liskeard and Camborne. Approximately half of all domestic abuse incidents where children are resident in the household are recorded as linked to alcohol.
- Two indicators have been used to estimate the prevalence of mental health issues in Cornwall: the mood and anxiety disorders indicator from the IMD and Experian's Mosaic public sector classification. The IMD measure indicates that there is a greater mental health need in the West of the county with areas such as Hayle and the wider Camborne and Redruth conurbation being identified. The Mosaic indicator also identifies households located near the coast as being most likely to experience mental health issues with Bude, Perranporth, St Ives, Marazion, Mevagissey and West Looe all being highlighted.
- Mapping data sources relating to rates of domestic abuse, parental substance use and mental health indicates the following areas as being at high risk: Camborne, Pool and Redruth, Bodmin, Penzance, Liskeard, Truro, Falmouth and Hayle. The West has the highest concentration of areas identified as having complex needs and most of the identified areas fall within the Camborne, Pool and Redruth Network area. Within the central locality, areas are focussed around the larger towns of Truro, Newquay, Falmouth and St Austell with a cluster of complex needs indicated in the China Clay community network area due to the high prevalence of parental substance misuse and domestic abuse incidents. In the East, areas of highest complex need tend to be located around

the towns of Bodmin and Liskeard, with other areas identified around Looe, Saltash, Launceston and Bude.

These key findings will be used to inform the Treatment Planning process for the 2012/13 financial year and the evidence will form the basis for specific actions to improve services and young people's outcomes in Cornwall in the coming year.