

## Supporting Information and Impact Assessment

Proposal:	Young Person's Substance Misuse Service
Executive Lead:	Councillor Derek Mills
Director / Assistant Director:	Caroline Dimond / Andy Dempsey

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<b>Section 1: Background Information</b>	
<b>1.</b>	<p><b>What is the proposal / issue?</b></p> <p>It is proposed that the budget for the Young Person's Substance Misuse service is reduced by £21,000.</p>
<b>2.</b>	<p><b>What is the current situation?</b></p> <p>There is no statutory basis for Children's Services to provide a substance misuse service. However, the budget for this service was initially an embedded element of the Youth Offending Team, and the Crime and Disorder Act (1998) recommends substance misuse as a core service in the prevention of offending and re-offending by young people.</p> <p>The Early Help pathway and the social care pathway equally require a resource to deliver against risk taking behaviour in teenagers who are considered Children in Need under the Children Act 1989 service in support of this is critical in mitigating the harm that can be caused through inappropriate substance misuse.</p> <p>The evidence base for commissioning this service is clear that substance misuse amongst young people contributes to a wide range of other serious problems experienced by this population, such as:</p> <ul style="list-style-type: none"> <li>● failing or falling behind at school</li> <li>● involvement in crime and anti-social behaviour</li> <li>● becoming a victim of crime</li> <li>● teenage pregnancy</li> <li>● mental health problems</li> <li>● risks of overdose and future drug dependency.</li> </ul> <p>Substance misuse services for young people can also save a significant amount of public money in the long term. The Local Authority have a responsibility to protect the health and wellbeing of the population and without this service we would potentially see increased social and economic problems around crime, education, unemployment, homelessness and generally poorer health outcomes for Torbay's young people.</p> <p>The Young Person's Substance Misuse Service in Torbay is accessible to all</p>

11-18 year olds residents who are experiencing substance related harm.

Compared to the national average, the latest data shows that Torbay has a higher rate of young people with wider vulnerabilities entering into treatment. These include, children who are looked after, children in need, domestic abuse, mental health problems, sexual exploitation, self-harm, not in education employment or training (NEET), child protection plans and being affected by others' substance misuse.

<b>Wider Vulnerabilities</b>	<b>Torbay</b>	<b>National</b>
Child looked after	16%	12%
Child in Need	14%	6%
Domestic Abuse	29%	21%
Mental health problem	43%	19%
Sexual exploitation	16%	6%
Self-harm	34%	17%
NEET	18%	17%
Child Protection plan	11%	7%
Affected by others substance misuse	36%	22%

(source: YP specialist substance misuse interventions - executive summary Q4 2015/16, Public Health England).

**3. What options have been considered?**

This service is currently under review by commissioning directors to explore how it fits more effectively and efficiently within a whole service pathway for young people. This will involve a re-commissioning exercise which is underway.

Envisaged cost savings resulting from the single pathway option would be achieved through efficiencies in processes and early interventions, increasing the skill mix of staff and the benefits of services being either co-located or joined through agreed tools and approaches therefore reducing duplication.

**4. How does this proposal support the ambitions, principles and delivery of the Corporate Plan 2015-19?**

This proposal supports the following principles of the Corporate Plan:

- Use reducing resources to the best effect.

**5. Who will be affected by this proposal and who do you need to consult with?**

	<ul style="list-style-type: none"> <li>• Young people who use the service</li> <li>• Key stakeholders such as GPs, Schools, Torbay and South Devon NHS Foundation Trust, Clinical Commissioning Group</li> </ul>
6.	<p><b>How will you propose to consult?</b></p> <p>Consultation will take place as part of the general consultation on the budget proposals. However, specific consultation will also be carried out on this proposal with service users and partners through a range of mechanisms.</p> <p>Young people themselves would be consulted with via a survey and/or focus groups to capture what elements of the service they truly value and deem paramount to their treatment / recovery journey.</p> <p>Commissioners will be consulted through a series of workshops to discuss all options around keeping the service viable with a reducing financial envelope.</p>
<b>Section 2: Expected Implications and Impact Assessment</b>	
7.	<p><b>What are the <u>expected</u> financial and legal implications?</b></p> <p>The proposal would provide £21,000 in savings in 2017/18.</p>
8.	<p><b>What are the <u>expected</u> risks?</b></p> <p>There is evidence that investment in young people's drug and alcohol interventions saves money; it results in £4.3m health savings and £100m crime savings per year. Drug and alcohol interventions can help young people get into education, employment and training, bringing a total lifetime benefit of up to £159m. Furthermore, every £1 spent on young people's drug and alcohol interventions brings a benefit of £5-£8.</p> <p>The reduction in this service may potentially impact on levels of crime, educational attainment, unemployment, homelessness and generally poorer health outcomes for Torbay's young people, leading to a greater demand for other public services.</p> <p>The potential risk in reducing the budget for this service would potentially affect outreach work in education settings and subsequently could remove the protective elements of the provision and so increase the demand for specialist services later on.</p>
9.	<p><b>Public Services Value (Social Value) Act 2012</b></p> <ul style="list-style-type: none"> <li>• The (re)procurement of services is not relevant for this report.</li> </ul>

<p><b>10.</b></p>	<p><b>What evidence / data / research have you gathered in relation to this proposal?</b></p> <p>The Torbay LA Public Health Team used a prioritisation matrix as an assurance that services were commissioned based on evidence, impact and effective efficiency.</p> <p>There are a range of guidance, recommendations and supporting documentation that underpins young person’s substance misuse provision. These are summarised on the following websites:</p> <p>Public Health England <a href="http://www.nta.nhs.uk/young-people.aspx">http://www.nta.nhs.uk/young-people.aspx</a></p> <p>National Treatment Agency for Substance Misuse <a href="http://www.nta.nhs.uk/uploads/nta_essential_elements_youngpeople.pdf">http://www.nta.nhs.uk/uploads/nta_essential_elements_youngpeople.pdf</a></p> <p>PHE JSNA Support Pack <a href="http://www.nta.nhs.uk/uploads/jsnadatapackyoungpeople2016-17.pdf">http://www.nta.nhs.uk/uploads/jsnadatapackyoungpeople2016-17.pdf</a></p>															
<p><b>11.</b></p>	<p><b>What are key findings from the consultation you have carried out?</b></p> <p>Feedback from the Mayor’s Budget consultation is shown below:</p> <table border="1" data-bbox="563 1330 1189 1597"> <thead> <tr> <th>Do you support this proposal?</th> <th>Number</th> <th>Percent</th> </tr> </thead> <tbody> <tr> <td>Yes</td> <td>190</td> <td>45.6%</td> </tr> <tr> <td>No</td> <td>197</td> <td>47.2%</td> </tr> <tr> <td>No answer</td> <td>30</td> <td>7.2%</td> </tr> <tr> <td><b>Total</b></td> <td><b>417</b></td> <td><b>100.0%</b></td> </tr> </tbody> </table> <p>There were a small number of survey responses that directly commented on the budget proposals in relation to the young person’s substance misuse reductions. These consist of 2 areas:-</p> <p><b>Cost effectiveness and impact</b> A concern was raised that because the substance misuse services directly impacts on children's health and families at risk, a reduction in these services which are already under resourced is dangerous. The result being that more children would be placed at risk and therefore more pressure would consequentially be placed upon children’s services.</p> <p><b>Importance of prevention</b></p>	Do you support this proposal?	Number	Percent	Yes	190	45.6%	No	197	47.2%	No answer	30	7.2%	<b>Total</b>	<b>417</b>	<b>100.0%</b>
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	<p>The importance of prevention was raised and it was felt that a reduction in the young person's substance misuse service would cause more problems down the line. It was pointed out that this is contradictory to the NHS 5 year forward plan which emphasises the future health of our nation and plans within the new models of care which all point to prevention.</p> <p>A fear was expressed that cutting a budget on such an area will lead to more young people establishing a long term habit of substance abuse, which has ongoing costs both in treating the individual for their complex health needs and often long term dependence on state benefits (ESA, housing etc).</p>
<p><b>12.</b></p>	<p><b>Amendments to Proposal / Mitigating Actions</b></p> <p>None</p>

## Equality Impacts

13	Identify the potential positive and negative impacts on specific groups			
		Positive Impact	Negative Impact & Mitigating Actions	Neutral Impact
	Older or younger people		<p>55% of young people in treatment who reside in Torbay were aged 15 years or under and 45% were aged between 16 and 17 years. (Qtr 2 2016/17)</p> <p>The highest proportion of service users are under 16-years old, therefore those who are aged 13-15 years may be disproportionately affected by any changes to the substance misuse service.</p> <p>Pathways currently in place for the transition of young people into adult services could be impacted due to the capacity of the workforce but this should be mitigated by the assertive engagement of young people transitioning to adult services remaining in place.</p>	
	People with caring Responsibilities	The service seeks to increase year on year the number of	Carers of young people in substance misuse treatment	

	<p>young people whose parents / carers access support. There has been a consistent increase in recorded activity for family work as a modality on NDTMS as young people are encouraged to allow parents and carers to participate in their treatment plans. The provider will still be expected to collaborate with young carers and young adult carer services therefore this element of the service will remain.</p>	<p>may be affected due to a potential shrinking workforce. Specific interventions such as training substance misuse workers in the Triple P Parenting programme may be affected.</p> <p>If the young person in treatment is themselves a parent or carer then their child or children may be negatively affected through the impact of the parents/carers own substance misuse.</p>	
People with a disability	<p>The service will continue to make themselves accessible to customers with disabilities including wheelchairs etc and other impairments such as sign language. The service will continue to collect the disability profiles of service users.</p>		
Women or men		<p>An average of 58% of young people in treatment were male and 42% were female. However, at age 15 a disproportionate number of females were using the service (71% of this age group being female). These figures therefore suggest that 15 year old females may be more affected from a reduction in</p>	

		<p>service. (Qtr 2 2016/17)</p> <p>Furthermore, substance misuse can increase the vulnerability of young females as captured through national surveys. Vulnerabilities can either be through reduced inhibitions and / or sexual exploitation including increased risk of:-</p> <ul style="list-style-type: none"> <li>• 'Regretted' sex</li> <li>• Unwanted pregnancies</li> <li>• Sexually Transmitted Diseases</li> </ul>	
<p>People who are black or from a minority ethnic background (BME) <i>(Please note Gypsies / Roma are within this community)</i></p>	<p>Substance misuse services will continue to work with young people who are black or from a minority ethnic background (BME).</p>	<p>The treatment population reflects the ethnic mix of Torbay's wider population. However, language and cultural barriers and lack of knowledge of an unknown system can inhibit people who are black and from a minority ethnic background (BME) from accessing health services. The opportunity for substance misuse services to actively seek and target this population will be limited due to reduction of resources.</p> <p>In mitigation substance misuse services should continue to actively promote their services in all forms that people from a</p>	



		different culture or with a different language can interact with.	
Religion or belief (including lack of belief)	No differential impact		
People who are lesbian, gay or bisexual	Individualised care plans, by definition recognise diversity and should enable appropriate interventions to be in place for all service users that take account of individual need. This includes the needs of black and minority ethnic service users, disabled service users, male and female users and lesbian, bisexual, gay and transgender service users.		
People who are transgendered	No evidence that the changes will disproportionately affect young people who have undergone gender reassignment.		
People who are in a marriage or civil partnership	No differential impact.		
Women who are pregnant / on maternity leave	The service will be available to young people who are misusing substances and are pregnant.		
Socio-economic impacts (Including impact on child poverty issues and deprivation)	There will continue to be additional support services for education, training, employment and leisure as part of the young persons planned discharge.	Budget cuts to the service may affect the dedicated (Tier 2) targeted service that currently provides education and programmes of learning for young people who are considered to be at risk of substance misuse. These include young offenders, young people truanting from school, young people looked after by the local authority, young people excluded from school	

		and young people whose parents / carers misuse substances.	
Public Health impacts (How will your proposal impact on the general health of the population of Torbay)	The overall aim of the service is to reduce the harm caused by illegal drugs (and other psychoactive substances) to individuals, their families and the wider community and includes positive outcomes in physical and psychological health, including sexual health.	<p>The Young Person's Substance Misuse services have a client group that is made up of vulnerable people often with very complex needs. Cutting capacity within this service could challenge the ability of the treatment system to improve outcomes around future employment, education, mental health and other health outcomes for this vulnerable group.</p> <p>This may be mitigated by adopting a universalism approach i.e. providing a service to all who need it, but prioritising resources to those who need it most.</p>	
<b>14</b>	<b>Cumulative Impacts – Council wide</b> (proposed changes elsewhere which might worsen the impacts identified above)	<ul style="list-style-type: none"> <li>• The impact of the wider proposals to teenage parents, health visiting and school nursing, sexual health and other young people focussed proposals may have a compounding effect on populations of young people.</li> <li>• There may be fewer sources of support and fewer appropriate services for young people to reduce or manage harm and risks.</li> <li>• This could lead to increases in young people who are vulnerable and who have complex needs and these needs going unmet in Torbay</li> </ul>	
<b>15</b>	<b>Cumulative Impacts – Other public services</b> (proposed changes	The new models of care in the health system locally, plus the emerging Sustainable Transformation Plan putting prevention first, is expecting more from local public health services when capacity in	

	elsewhere which might worsen the impacts identified above)	the system is decreasing.
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