

Report to: Executive Member Children's Services; and
Executive Member Human Resources Organisational Development and Diversity

Date: 26 and 27 July 2011

Report of: Director of Children's Services

Report No:

Contact Officer: John Daly, Assistant Director
Staying Safe

Tele No: [Ext 2130](#)

Report Title: **Proposed review and redesign of 360°, Young People and Families Substance Misuse Service**

**Confidential /
Non Confidential:**

(*Confidential Not for Publication*)

This report is exempt from publication by virtue of Paragraph 1 of Schedule 12A to the Local Government Act 1972.

Purpose:

To set out the proposed savings and efficiencies relating to 360° following the Executive budget decisions of 24th January 2011.

Recommendations:

The Executive Member is recommended to approve the attached report for consultation purposes with trades unions, staff and stakeholders.

Decision:

Background Doc(s):

(for use on Exec Rep)

Signed:

Leader / Executive Member

Monitoring Officer

Date:

Summary:

An Executive Summary is set out within the report below which includes

the following appendices:

- Appendix 1 Existing Organisational Structure
- Appendix 2 Proposed Organisational Structure
- Appendix 3 Equality Impact Assessment
- Appendix 4 Health Impact Assessment

Please note that relevant Job Descriptions and Person Specifications are available on request.

1.0 Executive Summary

- 1.1 The Council continues to face a very challenging financial context. On the 24th January 2011, the Executive approved a report setting out the budget options for securing significant savings within Children's Services, commencing a period of formal consultation.
- 1.2 This report sets out detailed proposals to review the 360° Young People and Families Substance Misuse Service (360°), which has been set a target to achieve a saving of £145,000, from the £645,000 budget.
- 1.3 This report outlines proposals to reduce staff and non staff costs by reviewing and rationalising the number and types of posts; and reviewing and reducing non staffing expenditure.
- 1.4 The proposals as set out in this report for consultation, indicate a potential overall reduction in staff establishment by an estimated 2.0 FTE from FTE.
- 1.5 These proposals, if agreed, would form the basis for consultation with trades unions, staff, elected members and key service users. It is anticipated that final proposals would be considered in October with (if appropriate) revised staffing structures in place by November 2011.
- 1.6 In 2010/11 the Substance Misuse Team received £184,741 in Area Based Grant, £371,337 from The Department of Health, £53,819 from the Youth Justice Board and £35,200 of Mainstream budget. In 2011/12 there is no Area Based Grant and the Youth Justice Board grant has been reduced to an allocation of £44,000, an 18% reduction and a loss of £9,819. The Department of Health grant has been reduced by £193,928 to £177,409. In total that is a loss of £371,969 compared to 2010/11. As a result of the grant reductions Project 360 is required to make savings of £145,000 so will have a budget in 2011/12 of £500,097 compared to a budget of £645,097 in 2010/11.

2.0 Introduction and Rationale for the Review

- 2.1 360° Young People & Families Substance Misuse Service has a dual role of providing direct services to young people under 18 years old and their families, and, in conjunction with SDO Substance Misuse, providing work force development, support and capacity building around young people's substance issues to the wider children's workforce in the Borough. This enables the specialist service to focus on the most vulnerable young people with complex needs whilst supporting other services to address young people's substance issues as a part of their service delivery i.e. education, prevention, targeted support.
- 2.2 Operating from the BASE building alongside other services for young people the team provides a range of appropriate services from one location, facilitating improved engagement and retention of young people who often do not access traditional service structures.
- 2.3 The service is a partnership between the Local Authority, NHS Bolton and the Youth Justice Board and employs both qualified and unqualified staff from a range of professional backgrounds; Social Work, Youth Work, Nursing, Mental Health, Complimentary Therapy and Family Support. This brings together a range of skills, experience and interventions all under one roof. The service has sessional support from a specialist doctor from the adult Substance Misuse Service.
- 2.4 Treatment and support for young people with substance misuse issues is a relatively new service delivery area and local services have developed incrementally since their inception in 2001 alongside knowledge and skills in the field. Children's workforce development is a key area as currently none of the professional qualifying courses for staff working with young people (social work, teaching, youth work, nursing etc) include modules on substance misuse.
- 2.5 Drug Strategy 2010: Reducing demand, restricting supply, building recovery, was launched by the Government on December 8th 2010. The Department for Education has cross government policy lead for young people and substance misuse (drugs, alcohol and volatile substances such as glue, gas and solvents).
- 2.6 Overseen by the National Treatment Agency (NTA), an arms length Health Body, local strategy and commissioning of specialist substance misuse services was originally the remit of the Drug Action Team (DAT), this has now been mainstreamed into Children's Services. The NTA will be disbanded and its core functions incorporated into the newly established Public Health England during 2013.
- 2.7 The service has been funded by a combination of central grants and mainstream funding from the Local Authority and NHS Bolton. Central grants include; Department of Health, Home Office, Department for Education and Youth Justice Board. A combination of a reduction in central grants and the need for both the Council and NHS Bolton to make savings and improve efficiency has led to the need to review the service. It is also an opportunity to take stock of and rationalise the incremental development of the service and ensure a continued focus on supporting vulnerable young people and their families.

3.0 Scope of The Review

- 3.1 The current structure chart for the service is shown at Appendix 1. Three posts are not included in the scope of the review, namely:
- Emotional Health Practitioner - CAMHS;
 - Team Manager - funded by NHS Bolton; and
 - Administrator - Business Admin Services Review
- 3.2 The overall reduction in funding requires the review to consider the following:
- A reduction in management posts;
 - Reviewing and rationalising the number and type of posts in the service;
 - Retaining the main functions of service delivery;
 - Retaining the focus on vulnerable young people and their families

4.0 Current Staffing Costs

- 4.1 Listed in the table below are the current management and staffing costs.

Post	Grade	Scp	FTE	Value	On costs	Total
<u>Staffing Budgets</u>						
Service Manager	12	51	1.0	43,394	9,981	53,375
Team Leader	11	47	1.0	39,855	9,167	49,022
SDO Substance Misuse	8	37	1.0	31,528	7,251	38,780
Substance Misuse Worker	8	35	0.8	23,389	5,379	28,768
Substance Misuse Worker	8	35	1.0	29,236	6,724	35,960
Substance Misuse Worker	8	35	1.0	29,236	6,724	35,960
Substance Misuse Worker	8	35	1.0	29,236	6,724	35,960
Support Therapist	8	35	1.0	29,236	6,724	35,960
Tier 2 Co-ordinator	8	37	0.8	24,681	5,677	30,357
Family Support Worker	7	31	1.0	26,276	6,043	32,319
Support Worker	6	27	1.0	22,958	5,280	28,238
Support Worker	6	27	1.0	22,958	5,280	28,238
Administrator	3	15	1.0	16,054	3,692	19,746
Support Worker (vacancy)	6	27	1.0	22,958	5,280	28,238
Car User Allowance						17,883
Total Staffing Costs			13.6	390,995	89,926	498,804
<u>Non Staffing Budgets</u>						
Premises						69,327
Training & MFD Charges						11,035
Supplies & Services						32,413
Agency & Contracted Services						25,718
Support Services						7,800
Total Non Staffing Cost						146,293
Total Expenditure Budget						645,097

Table 2 Additional Staff Information

Post	Grade	FTE	Comment
Team Leader	NHS	1.0	Out of Scope – NHS Funded
Emotional Health Practitioner	9	1.0	Out of Scope - CAMHS

5.0 Proposed Changes To The Service

- 5.1 As part of Children's Services savings and efficiencies programme, 360° has been set a target of reducing expenditure from £645,000 to £500,000 in order to realise a saving of £145,000.
- 5.2 It is proposed that this will be achieved through a combination of reducing management and operating costs, and retaining the core functions of the service by deleting current specialist posts in the service and re-emphasising those roles and responsibilities within the two generic posts of Substance Misuse Worker and Support Worker.
- 5.3 The proposed new structure is shown at Appendix 2.
- 5.4 It is anticipated that incorporating current specialist functions in revised generic job descriptions will minimise any reduction in levels of service delivery.
- 5.5 The changing nature of young people's substance misuse away from Class A drugs and subsequent treatment needs allows savings to be made in the areas such as specialist prescribing, observed consumption and agency and contracted services.

Savings Proposals

Proposals	Savings/Budget £'000	Savings/Budget £'000
Staffing		
Deletion of the following posts:		
Team Leader (1.0FTE)	49,022	
Tier 2 Co-ordinator (0.8 FTE)	30,357	
SDO Substance Misuse (1.0FTE)	38,780	
Support Therapist (1.0FTE)	35,960	
Family Support Worker (1.0FTE)	32,319	186,438
Creation of the following New Posts:		
Substance Misuse Workers (1.8FTE)	-68,304	
Support Worker (1.0FTE)	-30,315	-98,619
Reduction in Car User Allowance		2,471
Total Saving in Staffing Costs		90,292
Non Staffing		
Premises	4,300	
Agency & contracted services	21,700	
Support Services	7,800	
Specialist prescribing/observed consumption	15,000	
Supplies & services	5,910	54,710
TOTAL SAVINGS PROPOSED		145,000

Proposed Budget for New Structure

Post	Grade	Scp	FTE	Value	Oncosts	Total
Staffing Budgets						
Service Manager	12	51	1.0	43,394	9,981	53,375
Team Manager (PCT)	11	49	1.0	41,616	9,572	51,188
Substance Misuse Worker	8	35	0.8	23,389	5,379	28,768
Substance Misuse Worker	8	37	0.8	24,681	5,677	30,357
Substance Misuse Worker	8	35	1.0	29,236	6,724	35,960
Substance Misuse Worker	8	35	1.0	29,236	6,724	35,960
Substance Misuse Worker	8	35	1.0	29,236	6,724	35,960
Substance Misuse Worker	8	37	1.0	30,851	7,096	37,947
Support Worker	6	27	1.0	22,958	5,280	28,238
Support Worker	6	27	1.0	22,958	5,280	28,238
Support Worker	6	27	1.0	22,958	5,280	28,238
Support Worker	6	29	1.0	24,646	5,669	30,315
Car User Allowance						15,412
Total Staffing			11.6	345,159	79,386	439,956
Non Staffing						
Premises						58,550
Training & MFD Charges						9,961
Other						23,072
Total Non Staffing						91,583
Income						
PCT (to fund Team Manager)						-51,188
Total Proposed Budget						480,351
Transfer of Budget						
Administrator	3	15	1.0	16,054	3,692	19,746
					Total	19,746

6.0 Staff and Establishment Implications

- 6.1 Implementation of the proposed service will require a new structure, and potentially redundancies. Volunteers for redundancy will be sought. Subject to approval of the proposals at the end of the consultation period, staff in a redundancy situation will be managed and supported in line with the Council's restructure, redundancy and redeployment policy framework.
- 6.2 Staff were formally notified that they are "At Risk" in January 2011. A consultation period with Trades Unions and staff on the proposals in this report will take place until 26th September. During this time, meetings will be held with Trades Unions to discuss the proposals in detail. All members of staff will be offered a meeting with management and an HR advisor to discuss their individual position, options and concerns.

Staffing Implications

Table 1 The following posts would be redundant from the current structure

FTE	Post	Grade
1.0	Family Support Worker	Grade 7
0.8	Tier 2 Coordinator	Grade 8
1.0	SDO Substance Misuse	Grade 8
1.0	Support Therapist	Grade 8
1.0	Team Manager	Grade 11

Table 2 The following posts are directly comparable and will be slotted in:

New Post(s)	Current Post(s)
1 x Service Manager (Grade 12)	1 x Service Manager (Grade 12)
6 x Substance Misuse Workers (Grade 8)	4 x Substance Misuse Workers (Grade 8) 1 x Tier 2 Coordinator (Grade 8) 1 x Family Support Worker (Grade 7)
4 x Support Worker (Grade 6)	2 x Support Workers (Grade 6)

- 6.3 Where the grade of the comparable post is slightly lower, protection of earnings will apply for a two year period. Where the grade of the comparable post is slightly higher the post holder will be slotted in subject to a short assessment in line with HR policy.

Table 5 The following posts will be vacant in the new structure. It is proposed to fill these posts with priority to displaced and "at risk" staff within the service.

New Post(s)
2 x Support Worker (Grade 6)

7.0 Consultation and Implementation

- 7.1 At present the proposals in this report are for consultation only. If approved the proposals will be subject to a formal consultation process with Staff, Trades Unions and stakeholders. Prior to implementation of a new service structure account will need to be taken of any comments made through the consultation process and an amended report presented for formal approval.

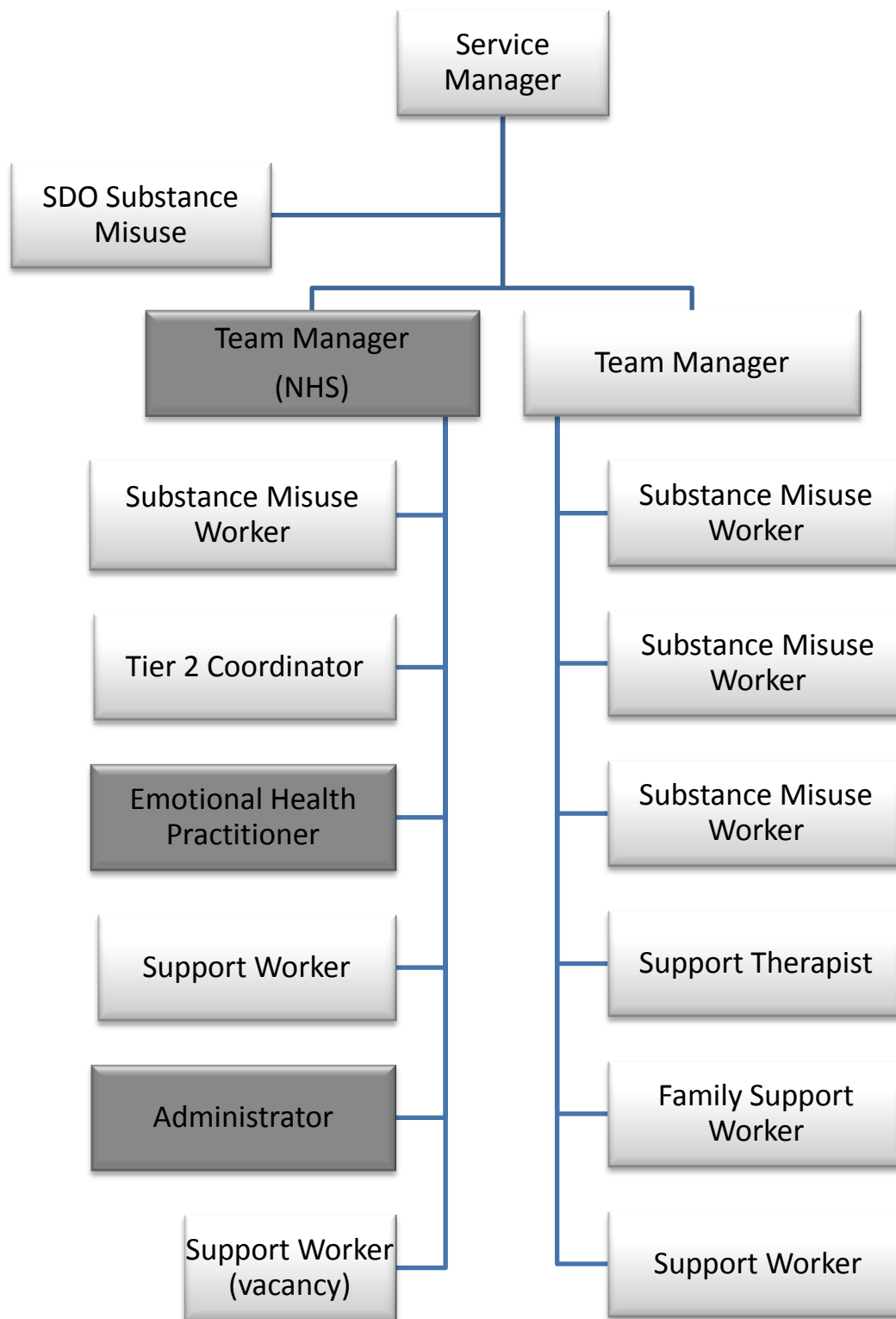
8.0 Impact Assessments

- 8.1 Equality and Health Impact Assessments regarding the proposals are attached. Whilst the small reduction in staffing could lead to a differential impact this will be mitigated through the increased absorption of core functions into generic posts and building on the current flexibility of roles and responsibilities within service delivery.
- 8.1 An Equality Impact Assessment screening form has been completed for the proposals outlined in this report, and is attached at Appendix 3
- 8.2 The Equality Impact Assessment looks at the anticipated impacts of the proposal on people from Bolton's diverse communities, and whether any groups /are likely to be directly or indirectly differentially affected.
- 8.3 At this stage it is not anticipated that the proposals will have a disproportionate impact on any of Bolton's diversity groups.
- 8.4 The analysis of equality impact will be tested during consultation, and an updated Equality Impact Assessment will be included with the report setting out the final proposals.

9.0 Recommendations

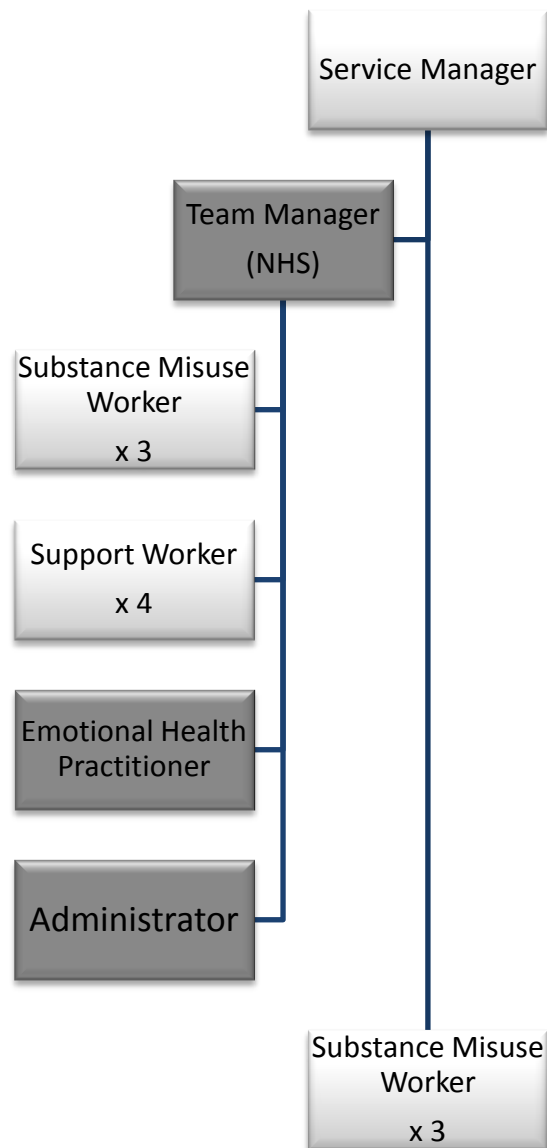
- 9.1 The Executive Member is recommended to approve the proposals as set out in this report for consultation purposes with trades unions, staff and stakeholders.

Appendix 1: Current Structure



Not in scope of the review

Appendix 2: Proposed Structure



Not in scope of the review

Equality Impact Assessment Part 1: Screening Form

Title of report or proposal:
Proposed review and redesign of 360°, Young People and Families Substance Misuse Service

Department:	Children's Services
Section/SIAP unit:	Staying Safe
Date:	

This report is for decision and is therefore subject to an Equality Impact Assessment. The following questions have been completed to ensure that this proposal, procedure or working practice does not discriminate against any particular social group. Details of the outcome of the Equality Impact Assessment have also been included in the main body of the report.

Equality Impact Assessment Questions

1. Describe in summary the aims, objectives and purpose of the proposal, including desired outcomes:

As part of Children's Services savings and efficiencies programme, 360° Young People and Families Substance Misuse Service has been set a target of reducing expenditure from £645,000 to £500,000 in order to realise a saving of £145,000.

It is proposed that this will be achieved through a combination of reducing management and operating costs, and retaining the core functions of the service by deleting current specialist posts in the service and re-emphasising those roles and responsibilities within the two generic posts of Substance Misuse Worker and Support Worker

2. Who are the main stakeholders in relation to the proposal?

- *Service Users*
- *Staff*
- *Council social care staff*
- *NHS Bolton*
- *Young People*

3. In summary, what are the anticipated (positive or negative) impacts of the proposal?

360° Young People & Families Substance Misuse Service has a dual role of providing direct services to young people under 18 years old and their families, and, in conjunction with SDO Substance Misuse, providing workforce development, support and capacity building around young people's substance issues to the wider children's workforce in the Borough. This enables the specialist service to focus on the most vulnerable young people with complex needs whilst supporting other services to address young people's substance issues as a part of their service delivery i.e. education, prevention, targeted support.

The service has been funded by a combination of central grants and mainstream funding from the Local Authority and NHS Bolton. A combination of a reduction in central grants and the need for both the Council and NHS Bolton to make savings and improve efficiency has led to the need to review the service. It is also an opportunity to take stock of and rationalise the incremental development of the service and ensure a continued focus on supporting vulnerable young people and their families.

The changing nature of young peoples substance misuse away from Class A drugs and subsequent treatment needs allows savings to be made in the areas such as specialist prescribing, observed consumption and agency and contracted services.

It is proposed that savings will be achieved through a combination of reducing management and operating costs, and retaining the core functions of the service by deleting current specialist posts in the service and re-emphasising those roles and responsibilities within the two generic posts of Substance Misuse Worker and Support Worker.

4. With regard to the stakeholders identified above and the diversity groups set out below:

	Is there any potential for (positive or negative) differential impact?	Could this lead to adverse impact and if so what?	Can this adverse impact be justified on the grounds of promoting equality of opportunity for one group, or for any other reason?	Please detail what measures or changes you will put in place to remedy any identified adverse impact
Race	<p>The studies reviewed by Galea, Nandt and Viahow do not, in general, find a clear relationship between ethnicity and the likelihood that someone will become involved in substance misuse.</p> <p>However, ethnicity can sometimes be associated with other forms of social disadvantage – such as higher rates of unemployment or lower educational attainment. These socio-economic disadvantages are, in some cases, linked with a higher risk of substance misuse –see the section of this assessment which looks at socio-economic issues for more detail on this.</p> <p>Data on the young people who use 360° suggests that client group for the project contains more white british young people than the Bolton average.</p>	<p>Situations where a young person is involved in substance misuse, but is not being supported to reduce the harm that the substance misuse can cause them, are associated with a range of negative behaviours and outcomes.</p> <p>These can range from pressure on family relationships and difficulty in finding and sustaining a stable home or employment to self neglect and, in some cases, being drawn into offending behaviour as a way of financing a</p>	<p>With regard to all the groups identified in this assessment, it should be noted that this proposal is driven by the corporate and departmental needs to significantly reduce spend in line with national budget reductions and the need to set a balanced budget.</p> <p>The proposal aims to minimise the effect of any changes to the project on service delivery by concentrating resources on the front line. We anticipate that the changes proposed should have only a limited effect on young people using the service.</p>	<p>It is important to recognise that the impacts of the proposed changes will be limited. The project, even in its reconfigured state will still provide substantial amounts of support to young people who are currently substance misusers and their families. This support will be targeted to ensure that those young people who most need help will still receive it.</p> <p>We believe that the effects of the proposal on front line service delivery will be minimal but we will be using the consultation period on these proposals</p>
Religion	<p>Galea, Nandt and Viahow report that the balance of research reviewed suggests that active involvement with a religious faith may make it less likely that an individual young person becomes involved in substance misuse.</p>			
Disability	<p>Adlal, Smart and Walsh found a “significant association” between disability and substance misuse – in particular the misuse of alcohol and tranquilisers.</p> <p>Taggart et al found lower rates of substance misuse among people with learning disabilities than for the</p>			

	population at a whole – though their research also identified instances of substance misuse among people with learning disabilities being unreported by families or carers.	<p>pattern of substance misuse.</p> <p>360° offers a range of interventions which seek to reduce the possibility of negative outcomes. Any change in the project's capacity to offer such support could have the impact of reducing the support that is available for young people to build up their ability to manage day-to-day life without substance misuse</p>		to consult with stakeholders as to whether this belief is justified.
Gender (including gender reassignment)	<p>Barnes, Welts and Hoffman found that young men are more likely than young women to become involved in substance misuse.</p> <p>Data on the young people who use 360° suggests this is also the case in Bolton, with significantly more young men than young women using the service.</p>			
Age	Barnes, Welts and Hoffman found that young adults are more likely to become involved in substance misuse than adolescents. In general, this is reflected in 360°'s client group.			
Sexuality	Ferguson and Horwood found no direct correlation between sexual orientation and likelihood of substance misuse in adolescence. However, Hughes and Eliason found heavy consumption of alcohol and other mood altering drugs among some young lesbians and gay men in young adulthood.			
Caring status (including pregnancy & maternity)	Salter and Clark highlight the considerable stresses that substance misuse among young people can place on their families. It is important to recognise these stresses, and to acknowledge that successful support of someone who is currently misusing mood altering drugs often benefits the service user's family as well as the service user themselves.			
Marriage and civil partnership	Some of the studies reviewed by Galea, Nandt and Viahow find a correlation between family breakdown in adolescence and a greater risk of becoming involved in poly-drug use.			

Socio-economic	<p>Galea, Nandt and Viahow report that the balance of research conducted found that poverty in childhood can lead to a greater likelihood that young people may be drawn into substance misuse later in life. Much of the research reviewed finds links between poverty and substance misuse.</p> <p>However, it is important to recognise that some of the research conducted reviewed suggests that there is no direct relationship between socio-economic status and tendency to become involved in substance misuse.</p> <p>Some research suggests that young people who have lots of friends who are substance misusers may be more likely to become substance misusers themselves.</p> <p>Consideration of range of social issues that can influence a young person to become involved in substance misuse therefore needs to have a wider focus than on merely financial issues.</p>			
Other comments or issues	<p>We are aware of the adverse impact this proposal will have on Council staff who may be subject to these proposals and are conscious of the impact of these proposals.</p> <p>Any potential redundancies or changes to terms and conditions that may result from the proposal will comply with the Council's Human Resources procedures which are designed to treat all staff equally and do not discriminate against any group of people. If a redundancy situation is identified the Council endeavours to address this by workforce planning procedures, including staff redeployment, consideration of voluntary redundancy or VER and all other reasonably practical measures.</p> <p>In the event of compulsory redundancy, our policy is based on: - work performance; skills and competencies; disciplinary record; and attendance record. Any reduction in the workforce will lead to a potential reduction in its diversification, however this will be through following the appropriate procedures and not the discrimination of particular members of staff based on any other criterion except that stated in our redundancy policy.</p> <p>Due to the low numbers of staff on specific grades or in individual named positions affected by this specific proposal, it is not appropriate to discuss the demographic breakdown of the staff team in detail in this assessment as this risks identifying individuals. The demographic breakdown of the affected staff will be considered when the impact of all our proposals is assessed.</p>			

Please provide a list of the evidence used to inform this EIA, such as the results of consultation, service take-up, service monitoring, surveys, stakeholder comments and complaints where appropriate.

If you have undertaken consultation as part of the proposal, the consultation manager will upload it on to the corporate database.

Academic research findings referenced in this assessment are partly drawn from **Galea, Nandt and Viahov** *The Social Epidemiology of Substance Use – Johns Hopkins Bloomberg School of Public Health, 2004*. This comprehensive literature review draws on the findings of over 100 studies of substance misuse in adolescence and young adulthood in North America, the UK and Europe and Australia to draw out general themes relating to the correlation between particular kinds of substance misuse and relevant social factors. For clarity's sake in this assessment, the individual studies reviewed by Galea, Nandt and Viahov are not cited by name. However, the full literature review is available at [this link](#)

Ferguson and Horwood *Is Sexual Orientation Related to Mental Health Problems and Suicidality? in Young People University of Christchurch*

Hughes and Eliason *Substance Use and Abuse in Lesbian, Gay, Bisexual and Transgender Populations in Journal of Primary Prevention Spring 2002*

Adlal, Smart and Walsh *Substance Use and Work Disabilities Among a General Population in The American Journal of Drug and Alcohol Abuse*

Taggart et al *An Exploration of Substance Misuse in People with Intellectual Disabilities in Journal of Intellectual Disability Research vol 50 (Blackwell 2006)*

Barnes, Welts and Hoffman *Relationship Of Alcohol Use To Delinquency And Illicit Drug Use In Adolescents: Gender, Age, And Racial/Ethnic Differences in Journal of Drug Issues. 2002 p153*

Salter and Clark *The Impact of Substance Misuse on the Family: A Grounded Theory Analysis of the Experience of Parents – University of Walse, Swansea*

5.a Are there any gaps in your evidence or conclusions that make it difficult for you to quantify the potential adverse impact?

An appropriate programme of consultation with key stakeholders will be conducted on these proposals. This will inform the final proposals to the Executive Member later in the year.

5.b If so, please explain how you will explore the proposal in greater depth or please explain why no further action is required at this time.

Please see above

You may wish to consider undertaking secondary data analysis, further consultation or research or investigating best practice. If you are planning to undertake further consultation or research as a result of this EIA, please contact the Consultation Manager on ext. 1083.

**This EIA form and report has been checked and countersigned by the
Departmental Equalities Officer before proceeding to Executive Member(s)**

Please confirm the outcome of this EIA:

No major impact identified, therefore no major changes required – proceed	<input type="checkbox"/>
Adjustments to remove barriers / promote equality (mitigate impact) have been identified – proceed	<input checked="" type="checkbox"/>
Continue despite having identified potential for adverse impact/missed opportunities for promoting equality – this requires a strong justification	<input type="checkbox"/>
Stop and rethink - the EIA identifies actual or potential unlawful discrimination	<input type="checkbox"/>

Report Officer

Name: Dave Seaber

Signature: DS

Date and Contact No: X 7323 13 July 2011

Departmental Equalities Lead Officer

Name: Andy Bent

Signature: AB

Date and Contact No: X4252 13 July 2011

Health Impact Assessment

This assessment is an integrated physical and mental health and wellbeing impact assessment. Processes for the assessment of impact on physical and mental health and well being as identified on the final page of this document have been considered together and combined to produce a single assessment.

Section 1: Background and context

Title of proposal being screened	Savings and Efficiencies – 360°
Date screening conducted	27 June 2011
Persons involved in the screening process	Andy Bent Dave Seaber
What stage of the development is the proposal at	Screening
Briefly outline the proposal	<p>360° Young People & Families Substance Misuse Service has a dual role of providing direct services to young people under 18 years old and their families, and, in conjunction with SDO Substance Misuse, providing workforce development, support and capacity building around young people's substance issues to the wider children's workforce in the Borough. This enables the specialist service to focus on the most vulnerable young people with complex needs whilst supporting other services to address young people's substance issues as a part of their service delivery i.e. education, prevention, targeted support.</p> <p>The service has been funded by a combination of central grants and mainstream funding from the Local Authority and NHS Bolton. A combination of a reduction in central grants and the need for both the Council and NHS Bolton to make savings and improve efficiency has led to the need to review the service. It is also an opportunity to take stock of and rationalise the incremental development of the service and ensure a continued focus on supporting vulnerable young people and their families.</p> <p>The changing nature of young peoples substance misuse away from Class A drugs and subsequent treatment needs allows savings to be made in the areas such as specialist prescribing, observed consumption and agency and contracted services.</p>

	It is proposed that savings will be achieved through a combination of reducing management and operating costs, and retaining the core functions of the service by deleting current specialist posts in the service and re-emphasising those roles and responsibilities within the two generic posts of Substance Misuse Worker and Support Worker.
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Section 2: Screening outcome

Overall health impacts are likely to be substantial or difficult to ascertain	YES	If Yes , proceed with HIA	Produce HIA Report
It is likely that there will be a significant impact on mental health and wellbeing	YES	If Yes , Proceed to integrate MWIA with HIA	Produce MWIA Report as part of overall HIA

HEALTH IMPACT ASSESSMENT

Date: 27 June 2011.

Carried out by:

	Name	Organisational Role
1	Andy Bent	SPU – initial draft
2	Dave Seaber	360° - sign off
3		

1	Title of the policy, project or programme	369° Savings and Efficiencies
2	Description of policy, project or programme	See above
3	Geographical area	Bolton
4	Time period	See above
5	Population Affected	See below

Client Type by Gender						
	YP		SIB		FC	
Male	151	65.94%	12	42.86%	**	**
Femal	78	34.06%	16	57.14%	44	**
Total	229		28		**	

Client Type by Ethnicity						
	YP		SIB		FC	
Other Mixed	**	**	**	**	**	**
White British	205	89.52%	26	92.86%	44	**
African	**	**	**	**	**	**
White & Black Caribbean	**	**	**	**	**	**
Bangladeshi	**	**	**	**	**	**
Indian	**	**	**	**	**	**
Not Stated	**	**	**	**	**	**
Other Asian	**	**	**	**	**	**
Other Mixed	**	**	**	**	**	**
Other White	**	**	**	**	**	**
Pakistani	**	**	**	**	**	**
White and Asian	**	**	**	**	**	**
White & Black Caribbean	**	**	**	**	**	**
Total	229		28		**	

** - values suppressed due to low numbers in individual groups/cohorts

6	Health Determinants (See Appendix 1 for Model of Health Determinants)			
Is the policy, project or programme affecting any of the following determinants of health?				
In the final column indicate the risk of the impact, is it:				
	Definite (D) Probable (P) Speculative (S)			
Personal/family circumstances and lifestyle	Positive Effect	Negative Effect	No Effect	Risk of Impact
Family structure and functioning	<input type="checkbox"/>	✓	<input type="checkbox"/>	S
Further education	<input type="checkbox"/>	✓	<input type="checkbox"/>	S
Occupation	<input type="checkbox"/>	✓	<input type="checkbox"/>	S
Unemployment	<input type="checkbox"/>	✓	<input type="checkbox"/>	S
Income	<input type="checkbox"/>	✓	<input type="checkbox"/>	S
Risk taking behaviour	<input type="checkbox"/>	✓	<input type="checkbox"/>	S
Diet (including access to food)	<input type="checkbox"/>	✓	<input type="checkbox"/>	S
Physical activity	<input type="checkbox"/>	✓	<input type="checkbox"/>	S
Substance use: alcohol, tobacco,	<input type="checkbox"/>	✓	<input type="checkbox"/>	S
Substance abuse: illegal substances	<input type="checkbox"/>	✓	<input type="checkbox"/>	S
Recreation	<input type="checkbox"/>	✓	<input type="checkbox"/>	S
Means of transport	<input type="checkbox"/>	<input type="checkbox"/>	✓	
Safe sex	<input type="checkbox"/>	✓	<input type="checkbox"/>	S
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Comments: In the event that the level of support available to young people who currently misuse mood altering substances or who are at risk of being drawn into substance misuse changes, there is potential for a range of impacts on the young person concerned.

Situations where a young person is involved in substance misuse, but is not being supported to reduce the harm that the substance misuse can cause them, are associated with a range of negative behaviours and outcomes. These can range from pressure on family relationships and difficulty in finding and sustaining employment to self neglect and, in some cases, being drawn into high risk sexual behaviour as a way of financing a pattern of substance misuse. 360° offers a range of interventions which seek to reduce the possibility of negative outcomes. Any change in the project's capacity to offer such support could have the impact of reducing the support that is available for young people to build up their ability to manage day-to-day life without substance misuse

However, it is important to recognise that the impacts of these changes will be limited. The project, even in its reconfigured state will still provide substantial amounts of support to young people who are currently substance misusers. This support will be prioritised and targeted to ensure that those young people who most need help will still receive it.

Psychological factors Mental health and wellbeing	Positive Effect	Negative Effect	No Effect	Risk of Impact
Enhancing Control	<input type="checkbox"/>	✓	<input type="checkbox"/>	S
Increasing Resilience and Community Assets	<input type="checkbox"/>	✓	<input type="checkbox"/>	S
Facilitating Participation	<input type="checkbox"/>	✓	<input type="checkbox"/>	S
Promoting Inclusion	<input type="checkbox"/>	✓	<input type="checkbox"/>	S
Self esteem	<input type="checkbox"/>	✓	<input type="checkbox"/>	S
Relationship building	<input type="checkbox"/>	✓	<input type="checkbox"/>	S
Communication skills	<input type="checkbox"/>	✓	<input type="checkbox"/>	S
Body image	<input type="checkbox"/>	✓	<input type="checkbox"/>	S
Motivation	<input type="checkbox"/>	✓	<input type="checkbox"/>	S
Feel good	<input type="checkbox"/>	✓	<input type="checkbox"/>	S
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Comments: In the event that the level of support available to young people who currently misuse mood altering substances or who are at risk of being drawn into substance misuse changes, there is potential for a range of impacts on the young person concerned. Situations where a young person is involved in substance misuse, but is not being supported to reduce the harm that the substance misuse can cause them, are associated with a range of negative behaviours and outcomes.

Many of the substances misused by service users of this project are used precisely **because** of their capacity to act directly on the service user's emotional state. To put it bluntly, the substances in question often help service users feel better about themselves or manage aspects of their emotional well being. The harm reduction and support mechanisms offered within the project often aim to build up young people's resilience and ability to manage daily life without the need for the use of mood altering substances. Any change in the project's capacity to offer such support could have the impact of reducing the support that is available for young people to build up their ability to manage day-to-day life without substance misuse.

However, it is important to recognise that the impacts of these changes will be limited. The project, even in its reconfigured state will still provide substantial amounts of support to young people who are currently substance misusers. This support will be prioritised and targeted to ensure that those young people who most need help will still receive it.

Key question	Assessment
How does the Proposal Impact on Participation?	<p>Many people who misuse mood altering substances are able to maintain roles as valued and active members of their community. However, for some people, substance misuse can be associated with lowered self esteem and a feeling that substantial barriers exist to full participation in society. Negative stereotyping of people who misuse substances can exacerbate this.</p> <p>360° helps service users build up their self confidence, potentially enabling them to take an active role in their local community. The work carried out in 360° also helps service users stabilise their life to an extent that will allow them to take up and maintain paid work, volunteering or educational opportunities.</p>
How does the Proposal Impact on Social Inclusion	<p>The open, non-judgemental ethos of 360° is central to its effectiveness. All service users are treated as valuable and worthwhile individuals with a contribution to make. This approach is central to helping staff and service users build up the therapeutic relationships which enable service users to stabilise their lives and take their places as active members of society.</p> <p>However, the work carried out in 360° also has wider benefits for community safety in Bolton. When young people are no longer involved in substance misuse, they are less likely to become involved in criminal or anti social activity.</p>
How does the Proposal Impact on People's Control?	<p>Many people who misuse mood altering substances are able to maintain roles as valued and active members of their community. However, for some people, substance misuse can be associated with lowered self esteem and a feeling that substantial barriers exist to full participation in society. Negative stereotyping of people who misuse substances can exacerbate this.</p> <p>360° helps service users build up their self confidence, potentially enabling them to take decisions about how best to manage their own lives. The work carried out in 360° also helps service users stabilise their life to an extent that will allow them to take up and maintain paid work, volunteering or educational opportunities.</p>
How does the Proposal Impact on Resilience and Community Assets?	<p>Many people who misuse mood altering substances are able to maintain roles as valued and active members of their community. However, for some people, substance misuse can be associated with lowered self esteem and a feeling that substantial barriers exist to full participation in society.</p> <p>360° helps service users build up their self confidence, potentially enabling them to take decisions about how best to manage their own lives. The work carried out in 360° also helps service users stabilise their life to an extent that will allow them to take up and maintain paid work, volunteering or educational opportunities.</p>

	<p>All service users are treated as valuable and worthwhile individuals with a contribution to make. This approach is central to helping staff and service users build up the therapeutic relationships which enable service users to stabilise their lives and take their places as active members of society.</p> <p>However, the work carried out in 360° also has wider benefits for community safety in Bolton. When young people are no longer involved in substance misuse, they are less likely to become involved in criminal or anti social activity.</p>
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Physical Environment	Positive Effect	Negative Effect	No Effect	Risk of Impact
Air	<input type="checkbox"/>	<input type="checkbox"/>	✓	
Housing conditions	<input type="checkbox"/>	<input type="checkbox"/>	✓	
Working conditions	<input type="checkbox"/>	<input type="checkbox"/>	✓	
Public safety	<input type="checkbox"/>	✓	<input type="checkbox"/>	S
Built environment and land use	<input type="checkbox"/>	<input type="checkbox"/>	✓	
Noise	<input type="checkbox"/>	<input type="checkbox"/>	✓	
Waste	<input type="checkbox"/>	<input type="checkbox"/>	✓	
Water	<input type="checkbox"/>	<input type="checkbox"/>	✓	
Other	<input type="checkbox"/>	<input type="checkbox"/>	✓	

Comments: When young people are no longer involved in substance misuse, they may be less likely to become involved in criminal or anti social activity. 360° offers a range of interventions which seek to reduce the possibility of harm for young people and the communities they live in. Any change in the project's capacity to offer such support could have the impact of reducing the support that is available for young people to build up their ability to manage day-to-day life without substance misuse

However, it is important to recognise that the impacts of these changes will be limited. The project, even in its reconfigured state will still provide substantial amounts of support to young people who are currently substance misusers. This support will be prioritised and targeted to ensure that those young people who most need help will still receive it.

Socio-economic Environment	Positive Effect	Negative Effect	No Effect	Risk of Impact
Crime – will the proposal have an effect on crime or the fear of crime?	<input type="checkbox"/>	✓	<input type="checkbox"/>	S
Culture – what effect will the proposal have on culture opportunities	<input type="checkbox"/>	<input type="checkbox"/>	✓	
Discrimination – Will the proposal have a discriminatory effect	<input type="checkbox"/>	<input type="checkbox"/>	✓	
Education – will the proposal have an effect on educational opportunities?	<input type="checkbox"/>	<input type="checkbox"/>	✓	
Employment – will the proposal have an effect on: <ul style="list-style-type: none"> • Employment opportunities? • The working environment? 	<input type="checkbox"/>	<input type="checkbox"/>	✓	
Family cohesion – will the proposal have an effect on levels of family contact?	<input type="checkbox"/>	✓	<input type="checkbox"/>	S
Housing – will the proposal affect the opportunity to live in a decent affordable home?	<input type="checkbox"/>	✓	<input type="checkbox"/>	S
Income – will the proposal have an effect on poverty levels?	<input type="checkbox"/>	✓	<input type="checkbox"/>	S
Recreation – will the proposal have an effect on recreational opportunities such as exercise, social contact, cultural activities and other areas?	<input type="checkbox"/>	✓	<input type="checkbox"/>	S
Social cohesion – will the proposal have an effect on levels of community interaction and neighbourliness?	<input type="checkbox"/>	✓	<input type="checkbox"/>	S
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Comments The work carried out in 360° helps service users stabilise their life to an extent that will allow them to take up and maintain paid work, volunteering or educational opportunities. Some kinds of substance misuse can be associated with reduced ability to sustain paid employment, or with the service user's neglect of themselves, their family and peers and their home environment. 360° offers a range of interventions which seek to reduce the possibility of harm for young people and the communities they live in. Any change in the project's capacity to offer such support could have the impact of reducing the support that is available for young people to build up their ability to manage day-to-day life without substance misuse.

However, it is important to recognise that the impacts of these changes will be limited. The project, even in its reconfigured state will still provide substantial amounts of support to young people who are currently substance misusers. This support will be prioritised and targeted to ensure that those young people who most need help will still receive it.

Access to Services	Positive Effect	Negative Effect	No Effect	Risk of Impact
Access to health services	<input type="checkbox"/>	✓	<input type="checkbox"/>	S
Access to council services	<input type="checkbox"/>	✓	<input type="checkbox"/>	S
Access to amenities	<input type="checkbox"/>	✓	<input type="checkbox"/>	S
Access to public transport	<input type="checkbox"/>	<input type="checkbox"/>	✓	
Access to housing support services provided by the local authority or social housing providers	<input type="checkbox"/>	<input type="checkbox"/>	✓	

(Note – If there is likely to be a positive or negative effect on access to service factors, note briefly in the box below what those effects may be)

Many people who misuse mood altering substances experience no difficulty in accessing the full range of public services they are entitled to. However, for some people, substance misuse can be associated with lowered self esteem and a feeling that substantial barriers exist to access to services. Negative stereotyping of people who misuse substances can exacerbate this.

Public Policy	Positive Effect	Negative Effect	No Effect	Risk of Impact
Economic/ Social/ environmental / Health trends	<input type="checkbox"/>	<input type="checkbox"/>	✓	
Local and national priorities	<input type="checkbox"/>	<input type="checkbox"/>	✓	
Local health policies	<input type="checkbox"/>	<input type="checkbox"/>	✓	
Local health programmes	<input type="checkbox"/>	<input type="checkbox"/>	✓	
Local health projects	<input type="checkbox"/>	<input type="checkbox"/>	✓	

(Note – If there is likely to be a positive or negative effect on access to public policy, note briefly in the box below what those effects may be)

Comments:

Adapted from:

“Health Impact Assessment: a practical guidance manual, The Institute of Public Health in Ireland, 2003” Public Health Department, South Eastern Health Board
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And “Mental Well-being Impact Assessment: A Toolkit” Care Services Improvement Partnership
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