

Partnership name:  
Sandwell

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Drug treatment, reintegration and recovery in the community and  
prisons 2010/11  
Part 3: Planning grids

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## Planning grid 1: Commissioning a local drug treatment system

Please see checklist at Appendix 1 of the 2010/11 plan guidance for possible areas to include within this planning grid

### Identification of key priorities following needs assessment relating to commissioning system:

1. Continuity and improved performance & accountability of current service provision
2. Drug Treatment System Redesign: Re-tendering & Procurement of key service provision
3. Ensure appropriate development & capacity of the treatment system to deliver against the Families Agenda
4. Ensure appropriate development & capacity of the treatment system to deliver against the Recovery Agenda
4. Ensure that the treatment system is able to deliver and respond to the needs of an emerging Alcohol, Cannabis, Cocaine & Ecstasy (ACCE) cohort

### Objective 1

**Continuity and improved performance & accountability of current service provision**

#### Delivery Plan:

Actions and milestones	By when	By whom
Needs Assessment findings and Treatment Plan priorities as underpinning the system redesign and influencing the commissioning process & raising awareness of emerging agendas with partners/ providers	On-going	DAAT/ Partners/ Providers
Continue and evaluate Quality Assurance Framework (QAF) to achieve local / national targets and standards.	On-going every quarter	DAAT
Adapt QAF to reflect the outcome based model for future service provision/ system redesign	Quarter 3 2010/11	MB/MS
Continued development and sustained progress of the Continuity of Care Action Plan (between prisons and the community)	On-going	MS/Providers
Internal data audit to anticipate any potential risks to performance with regards to upcoming retender	Quarter 1	MB/MS/ Providers

and procurement work	2010/11	
Workforce development and awareness raising with regards to emerging agendas such as the Family, Recovery, Employability, Personalisation etc.	On-going	DAAT/ Providers

## Objective 2

### Drug Treatment System Redesign: Re-tendering & Procurement of key service provision

#### Delivery Plan:

Actions and milestones	By when	By whom
Needs Assessment findings and Treatment Plan priorities as underpinning the system redesign and influencing the commissioning process	On-going	DAAT
Development of Provider Exit/ Continuity Strategy to safeguard performance and quality/continuity of care	Quarter 2 2010/11	MH/ DAAT/ Providers
Define and agree the outcome based model for future service provision/ system design ( <i>including the intention for a locally agreed single assessment tool/process</i> ) which meets Needs Assessment recommendations around emerging agendas such as the Family, Recovery, Employability, Safeguarding and Personalisation	Quarter 1 2010/11	MH/ DAAT
Production of tender documents to reflect outcomes model for future service provision	Quarter 1/ 2 2010/11	DAAT
Procure services which meet identified outcomes	Quarter 3	DAAT
Review of existing Care Pathways and development of new Integrated Care Pathways to encompass Families, Recovery and ACCE cohort as key emerging agendas	On-going	DAAT/ PCT/ Providers
Assess local need & resources around mental health & substance misuse re: Dual Diagnosis	Quarter 3 2010/11	MH/ NP
Coordinate delivery of training events around the Families agenda to influence current and future best practice	Quarter 2 2010/11	IB
Internal data audit to anticipate & prevent any potential risks to performance in light of upcoming	Quarter 1	MB/MS/ Providers

retender and procurement work (to inform above exit/continuity strategy)	2010/11	
Ensure timely and accessible communications to our client group with regards to any planned key service changes (to inform above exit /continuity strategy)	On-going	IB/Hi's & Lo's
Ensure service users are involved in commissioning decisions with regards to retender and procurement work	On-going	IB/Hi's & Lo's/ Links
Carry out an independent internal clinical audit of service provision to identify and mitigate any risk to duty of care	Quarter 1 2010/11	MH/RV/PCT/ST

### Objective 3

#### Ensure appropriate development & capacity of the treatment system to deliver against the Families Agenda

##### Delivery Plan:

Actions and milestones	By when	By whom
Coordinate delivery of training events around the Families agenda to influence current and future best practice ensuring a commonly accepted definition and understanding of a 'whole family approach'	Quarter 2 2010/11	IB
Review of existing and development of new Integrated Care Pathways to encompass Families agenda – inclusive of National Treatment Agency/Department for Schools Children & Families joint guidance on the development of local protocols between drug, alcohol, safeguarding and family services.	On-going	DAAT/ PCT/ Providers
Ensure assessment & delivery of interventions based on a 'Whole Family Approach' in collaboration with Children & Young People Commissioner	Quarter 2 2010/11	JCT/ DAAT
Embed Family outcomes within QAF ( <i>no. of family members/carers involved in users care plan &amp; family service as increasing treatment naive penetration, Harm Reduction –Blood BorneViruses, CAF assessments carried out etc..</i> )	Quarter 3 2010/11	MH/ MB

### Objective 4

#### Ensure appropriate development & capacity of the treatment system to deliver against the Recovery Agenda

**Delivery Plan:**

<b>Actions and milestones</b>	<b>By when</b>	<b>By whom</b>
Review of existing Care Pathways and development of new Integrated Care Pathways to encompass Families, Recovery and ACCE cohort as key emerging agendas	On-going	DAAT/ PCT/ Providers
Intelligence around view of/ demand for Tier 4 interventions & appropriate commissioning response and establish a Tier 4 referral panel to assess suitability and readiness for inpatient services & residential rehabilitation	Quarter 1 2010/11	MH/Providers/Adult Services
Implementation of new standards around Tier 4 provision in line with the recommendations from the NTA Tier 4 expert group ( <i>inclusive of continuity of care</i> )	Quarter 1 2010/11	MH
Implementation of Recovery Support Services Pilot to deliver short term supported drug & alcohol free accommodation and bespoke behaviour change programmes	Quarter 1 2010/11	MH/ MB/ SAVE
Establishing a local 'recovery community' that can develop mentoring and volunteering opportunities	On-going	DAAT/ SAVE/ Providers
Ensure that aftercare and relapse prevention are integral components of every care plan	Quarter 1 2010/11	DAAT/ Providers
A shared vision of 'recovery' within local partnerships and providers to develop a framework for co-ordinated recovery oriented initiatives and seek agreement to adopt the United Kingdom Drug Policy Commission recovery definition locally.	Quarter 1 2010/11	DAAT/Providers

**Objective 5**

**Ensure that the treatment system is able to deliver and respond to the needs of an emerging ACCE cohort**

**Delivery Plan:**

<b>Actions and milestones</b>	<b>By when</b>	<b>By whom</b>
Review of existing Care Pathways and development of new Integrated Care Pathways to encompass Families, Recovery and ACCE cohort as key emerging agendas	On-going	DAAT/ PCT/ Providers

Address suitability and effectiveness of service provision for those aged 15-24 to link in with the Children & Young People commissioner to develop a bespoke transitional service	On-going	DAAT/ JCT
Participate in the Rapid Assessment Intervention & Discharge Pilot (RAID) to increase treatment penetration for the ACCE cohort	On-going	DAAT/ Local Authority/ PCT/ MHT
Continue to monitor & sustain the variety of Tier 2 interventions currently in place for this cohort	On-going	DAAT/ Provider (Open)

**Expected outcomes:**

To ensure an effective continuity of care during the re-tendering process, and to develop the foundations for our new outcomes based model. Ensure that the system is fit to deliver needs assessment priorities identified and establish good practise standards against emerging agendas.

## Planning grid 2: Access and engagement with the drug treatment system

Please see checklist at Appendix 1 of the 2010/11 plan guidance for possible areas to include within this planning grid

### Identification of key priorities following needs assessment relating to access and engagement with the drug treatment system:

1. Drug Treatment System Redesign to ensure maximum access and engagement
2. Increase Treatment penetration
3. Continuity of Care – Drug Intervention Programme & Tier 4
4. Families –provide support for users, carers and families
5. Develop the role of Primary Care in the delivery of drug and alcohol services that is consistent with the UK guidelines on Clinical Management

**Note:** Please cut and paste the objective, actions and milestones boxes, and number objectives to allow for the full range of objectives required for the plan.

#### Objective 1

#### Drug Treatment System Redesign to ensure maximum access and engagement

#### Delivery Plan:

Actions and milestones	By when	By whom
Development of a Common screening and assessment process across the treatment system to expedite referrals into treatment and ensure appropriate course of action for inappropriate referrals	Quarter 4 2010/11	DAAT/ Providers
Review and development of Integrated Care Pathways to ensure that care coordination and co-case management can meet a clients' needs holistically (re: engagement)	On-going	DAAT/ Providers
Review of the functionality and accessibility of both physical and non-physical resources at Metro Court to enhance the quality of engagement for service users	On-going	DAAT/Providers
Promotion of added value of Metro Court to clients –particularly Satellite Services' provision	On-going	IB/Providers

**Objective 2****Increase Treatment penetration****Delivery Plan:**

<b>Actions and milestones</b>	<b>By when</b>	<b>By whom</b>
Development/integration of borough-wide Needle Exchange delivery (including mobile, specialist base and pharmacy based services) as a way to engage with treatment naïve clients/ clients not currently in treatment and prepare such clients for entry into treatment through the use of the Needle Exchange module	Quarter 2 2010/11	Aquarius/ Hi's & Lo's/ Pharmacies
Monitor and manage Family commissioned services as a way of increasing treatment penetration for those treatment naïve clients who have carers/ family members in contact with family support services	On-going	DAAT/ Aquarius
Embed Family outcomes within Quality Assurance Framework ( <i>no. of family members/carers involved in users care plan &amp; family service as increasing treatment naïve penetration, HR-BBVs, CAF assessments carried out etc..</i> )	Quarter 3 2010/11	MH/ MB
Promotion of accessibility/added value of Metro Court to clients inc. Satellite Services provision	Quarter 3/4 2010/11	IB/Providers
Work with police to align agendas e.g. community resolutions/ more voluntary & proactive work to increase treatment penetration for offending substance misusers.	On-going	MS/Providers
Work with the Police, Courts and providers to ensure compliance and preparation for Section 17, Policing and Crime Act 2010 re: Engagement & Support Orders for commercial sex workers	On-going	DAAT/ Police/ Courts/ Providers
Address suitability and effectiveness of service provision for those aged 15-24 to link in with the Children & Young People commissioner to develop a bespoke transitional service	On-going	DAAT/ JCT
Participate in the Rapid Assessment Intervention & Discharge Pilot (RAID) to increase treatment penetration for the ACCE cohort	On-going	DAAT/ Local Authority/ PCT/ MHT
Continue to monitor & sustain the variety of Tier 2 interventions currently in place for the ACCE cohort	On-going	DAAT/ Provider (Open)

**Objective 3**  
**Continuity of Care – DIP and Tier 4**

**Delivery Plan:**

<b>Actions and milestones</b>	<b>By when</b>	<b>By whom</b>
Continued development and sustained progress of the Continuity of Care Action Plan (between prisons and the community)	On-going	MS/Providers
Implementation of new standards around Tier 4 provision in line with the recommendations from the NTA Tier 4 expert group ( <i>inclusive of continuity of care</i> )	Quarter 1 2010/11	MH
Continue to work with the Courts to improve Restriction on Bail and Drug Rehabilitation Requirement applications	On-going	DAAT/Probation/Courts
Review the Court team capacity to reflect the move to a single integrated court system	Quarter 1 2010/11	DAAT/Probation
Negotiate with local IDOM as to future needs	On-going	DAAT/IDOM
Intelligence around view of/ demand for Tier 4 interventions & appropriate commissioning response and establish a Tier 4 referral panel to assess suitability and readiness for inpatient services & residential rehabilitation	Quarter 1 2010/11	MH/Providers/Adult Services

**Objective 4**  
**Families –support for carers, users and families**

**Delivery Plan:**

<b>Actions and milestones</b>	<b>By when</b>	<b>By whom</b>
Monitor and manage Family commissioned services as a way of increasing treatment penetration for those treatment naive clients who have carers/ family members in contact with family support services	On-going	DAAT/Providers

Embed Family outcomes within Quality Assurance Framework ( <i>no. of family members/carers involved in users care plan &amp; family service as increasing treatment naive penetration, HR-BBVs, CAF assessments carried out etc..</i> )	Quarter 3 2010/11	MH/ MB
Review of existing and development of new Integrated Care Pathways to encompass Families agenda – inclusive of National Treatment Agency/Department of Schools Children & Families joint guidance on the development of local protocols between drug, alcohol, safeguarding and family services.	On-going	DAAT/ PCT/ Providers
Review funding and growth options for users and carers 2010/11	Q3 2010/11	DAAT

### Objective 5

**Develop the role of Primary Care in the delivery of drug and alcohol services that is consistent with the UK guidelines on Clinical Management**

#### Delivery Plan:

<b>Actions and milestones</b>	<b>By when</b>	<b>By whom</b>
Develop integration of Needle Exchange services borough-wide (inclusive of pharmacy, specialist and mobile Needle Exchange services)	Q1 2010/11	DAAT/Providers
Review of Pharmacy Needle Exchange provision and ability to capture 'desirable' NEXMS information to promote treatment penetration and Harm Reduction messages	Q2 2010/11	DAAT/Providers/ Pharmacies/ LPC
Review of Primary Care (inclusive of alcohol and Children/Young People agenda) commissioning intentions and structures within the system. To influence treatment system redesign.	Quarter 1 2010/11	ST/RBY/Primary Care Substance Misuse Group
<b>Review availability of Blood Borne Virus interventions within Primary Care setting</b>	<b>Quarter 2 2010/11</b>	<b>DAAT</b>
<b>Recruitment of a Primary Executive Committee lead for drugs</b>	<b>Quarter 1 2010/11</b>	<b>DAAT/ PCT</b>

**Expected outcomes:**

Ensuring the treatment system is capable of responding to a wider range of needs.

To deliver a higher quality engagement and more proactive /responsive service for clients.

### Planning grid 3: Retention in and effectiveness of the drug treatment system

Please see checklist at Appendix 1 of the 2010/11 plan guidance for possible areas to include within this planning grid

**Identification of key priorities following needs assessment relating to retention in and effectiveness of the drug treatment system:**

1. Continue improvement monitoring of NI40: Vital Signs
2. Improve the user experience/journey by focusing on quality outcomes (Treatment Outcome Profiles)-TOPs and care planning
3. Progress the development of Harm Reduction activity including Blood Borne Virus programme and links with Public Health

**Note:** Please cut and paste the objective, actions and milestones boxes, and number objectives to allow for the full range of objectives required for the plan.

**Objective 1**

**Continue improvement monitoring of NI40: Vital Signs**

**Delivery Plan:**

<b>Actions and milestones</b>	<b>By when</b>	<b>By whom</b>
Indicator included in Sandwell LAA with quarterly reporting framework through SSP & PCT (Vital Signs)	On-going	MB
Application of NTA Planned Exits checklist to local services in order to address and reduce unplanned exits	Quarter 1 2010/11	DAAT/Providers
Internal data audit to sustain levels of performance against NI40 seen to date and to anticipate any potential risks to performance in light of upcoming retender and procurement work (to inform exit/continuity strategy)	Quarter 1 2010/11	MB/MS/ Providers
Review and development of Integrated Care Pathways to ensure that care coordination and co-case	On-going	DAAT/ Providers

management can meet a clients' needs holistically (re: engagement & retention)		
Service user feedback on the quality and experience of the local drug treatment system to inform/guide the commissioning process		DAAT/Hi's & Lo's
Care plan audit to review the care planning process which should be flexible enough to encompass clients' desired outcome –to enhance ownership	Quarter 3 2010/11	DAAT/Providers
Effective protocols in place to support rapid re-engagement through a clearly defined relapse policy which recognises the importance of continued work with a client rather than automatic discharge or unplanned exit	Quarter 2 2010/11	DAAT/Providers

### Objective 2

**Improve the user experience/journey by focusing on quality outcomes (Treatment Outcome Profiles)-TOPs and care planning**

#### Delivery Plan:

Actions and milestones	By when	By whom
TOPs to be used to inform the care plan review process and as a tracking tool to illustrate client progress	On-going	DAAT/Providers
Audit of user experience of TOP and engagement in care planning through service based consultation and implementation of the NTA Good Practice Guidance: Care Planning 2008	Quarter 2 2010/11	DAAT/Providers
Consistent achievement of 80% completion levels for TOP starts, reviews and exits	On-going	MB/Providers
Use TOPs management information to understand the efficacy of treatment services	On-going	MB/Providers

### Objective 3

**Progress the development of Harm Reduction activity including the Blood Borne Virus programme and links with Public Health**

#### Delivery Plan:

<b>Actions and milestones</b>	<b>By when</b>	<b>By whom</b>
Develop integration of Needle Exchange services borough-wide (inclusive of pharmacy, specialist and mobile Needle Exchange services) and promote use of 9 step NX module as widely as possible	Q1 2010/11	DAAT/Providers/ Pharmacies/ LPC
Assist with a Stakeholder day to promote the newly established Strategic Group for Harm Reduction across partners and services (inclusive of alcohol and young people agenda) & devise actions that are Partnership focussed	Quarter 1 2010/11	Public Health/ DAAT/Partners/ Providers
Incorporate the Confidential Inquiry process into local Safeguarding policies and procedures	Quarter 3 2010/11	DAAT/Partners
On-going progress with the provision of community outreach and Community Champions	Quarter 2 2010/11	ST/Aquarius
Review availability of BBV interventions within primary care settings	Quarter 2 2010/11	DAAT
Review of Pharmacy Needle Exchange provision and ability to capture 'desirable' NEXMS information to promote treatment penetration and Harm Reduction messages	Q2 2010/11	DAAT/Providers/ Pharmacies/ LPC
Joint production of the revised Partnership Harm Reduction Strategy (inclusive of Alcohol and Children/Young People agenda)	Quarter 1 2010/11	Public Health/ DAAT/ Partners

**Expected outcomes:**

Increased quality and efficacy of services to meet needs holistically.  
Reduce health harms and reoffending.

## Planning grid 4: Outcomes, discharge and exit from the drug treatment system

Please see checklist at Appendix 1 of the 2010/11 plan guidance for possible areas to include within this planning grid

### Identification of key priorities following needs assessment relating to outcomes, discharge and exit from the drug treatment system:

1. Enhance the employability agenda by developing a strategic approach to the delivery of the National Drug Strategy priorities
2. Progress and embed the recovery agenda
3. Review and coordinate accommodation and housing provision to enhance outcomes of the treatment system

### Objective 1

Enhance the employability agenda by developing a strategic approach to the delivery of the National Drug Strategy priorities

#### Delivery Plan:

Actions and milestones	By when	By whom
Continuing the expansion of possible access routes to 'workability' resources for clients through on-going development of a wider partnership with JC+, Satellite Services, links with the Learning & Skills Council through SMBC and existing commissioned services	On-going	DAAT/ JC+/ Providers
Development of Quality Assurance Framework to include Part2 priorities around employability outcomes	Quarterly	MB/ Providers
Continue to provide and promote employment, advice and guidance through establishing JC+ Satellite Service based at Metro Court	Quarter 1 2010/11	DAAT/JC+
Monitor the DWP Pilot scheme commencing October 2010 and establish any good practise to be applied locally	Quarter 3	DAAT

### Objective 2

**Progress and embed the recovery agenda**

**Delivery Plan:**

<b>Actions and milestones</b>	<b>By when</b>	<b>By whom</b>
Reprioritise Aftercare and Relapse prevention within the Care Planning process to enhance treatment received	Quarter 2 2010/11	DAAT/ Providers
A shared vision of 'recovery' within local partnerships and providers to develop a framework for co-ordinated recovery oriented initiatives and seek agreement to adopt the United Kingdom Drug Policy Commission recovery definition locally.	Quarter 1 2010/11	DAAT/Providers
Pilot a Recovery Support programme to achieve and maintain a drug/alcohol free lifestyle; provide a structured exit from mainstream services; maximise opportunities for successful re-integration; and establish a local Recovery Community	On-going 2010/11	MH/Providers
Implementation of new standards around Tier 4 provision in line with the recommendations from the NTA Tier 4 expert group ( <i>inclusive of continuity of care</i> )	Quarter 1 2010/11	MH
Work with individuals to build social capital/ networks to support acquisition of a range of life-skills, confidence building and personal development	On-going	DAAT/Hi's & Lo's
Intelligence around view of/ demand for Tier 4 interventions & appropriate commissioning response and establish a Tier 4 referral panel to assess suitability and readiness for inpatient services & residential rehabilitation	Quarter 1 2010/11	MH/Providers/ Adult Services

**Objective 3**  
**Review and coordinate accommodation and housing provision to enhance outcomes of the treatment system**

**Delivery Plan:**

<b>Actions and milestones</b>	<b>By when</b>	<b>By whom</b>
Conduct a review of all Housing provision for drug and alcohol users	Quarter 1 2010/11	PJS/Housing Providers

Development of Quality Assurance Framework to include Part2 priorities around accommodation outcomes	Quarterly	MB/ Providers

**Expected outcomes:**

A treatment system that will deliver personalised and quality outcomes for all clients –addressing health, economic, environmental and social needs.

People enter and exit the treatment system in a care planned way.