**Brief 6: Children & Young People with or affected by substance use**

1. **Introduction:**
	1. Commissioning practice within Education & Children Services is aligned to Fife Council’s Monitoring & Evaluation Framework. The Framework is clear that any organisation in receipt of a recurring grant in excess of £10K must make a fresh application every three years. The current commissioning cycle is due to conclude in April 2024, at which point a new cycle shall begin.

* 1. Commissioning priorities have emerged from a high-level Strategic Needs Analysis (SNA), which contains three distinct elements (1) Policy Mapping & Analysis (2) Population Needs Assessment (3) Resource Analysis. The SNA reaffirms existing commitments to support families to remain safely living together through the provision of community embedded, family facing models of support.
	2. Combined, these activities have helped to establish that poverty in the early years, unsupported caring responsibilities, disability, domestic abuse, mental health and substance use are the main vulnerabilities which cause suffering and distress within the family unit, lead to family breakdown and fresh experiences of trauma and loss. The work detailed within the SNA establishes that recovery is best supported through models of support which are family inclusive, rights- based, and which focus upon and promote the ‘wellbeing’ of the whole family unit.
	3. This brief sets out Commissioning priorities in regard to children and young people with or affected by Substance Use.

1. **National & Local Drivers, Legislation, Best Practice …**

2.1 UNCRC:

The Convention contains 54 articles which set out the civil, political, economic, social and cultural rights that all children everywhere are entitled to. The Convention recognises the family unit as the natural environment for the growth and well-being of all its members and especially children. The Convention provides clear parameters about the responsibilities member states have to protect and support the well-being of children within the family unit, and the measures that must be taken to promote their voice within all decisions which affect them.

Core Articles which are relevant to this brief include, one, three, five, six, seven, nine, twelve, eighteen, nineteen, twenty, twenty-three, twenty-five, twenty-seven, thirty-three, thirty-four and thirty-nine.

2.2 Children & Young People Scotland Act (2014):

The Children & Young People Scotland Act (2014) is a key part of the Scottish Government’s strategy to make Scotland the best place in the world to grow up and is underpinned by the UNCRC, the Alternative Care Guidelines and GIRFEC National Practice Model. Part 12 of the Act places a duty on Local Authorities to provide services for Children who are at risk of becoming looked after and stipulates that this must include support services for parents in their care giving role. Part 18 of the Act incorporates the definition of wellbeing established within GIRFEC (SHANARRI) onto a statutory footing.

2.3 Getting it Right for Every Child (GIRFEC):

GIRFEC is The Scottish Government’s National Practice Framework designed to support the ‘wellbeing’ of children and young people within the family unit. GIRFEC contains a definition of Well-Being as Shared, Healthy, Achieving, Nurtured, Active, Respected, Responsible and Included. The Framework provides services and practitioners with a shared language for assessing, promoting and safeguarding the wellbeing of children & young people against these eight indicators.

2.4 The Promise:

The Promise articulates the findings from the Independent Care Review. It describes the vulnerabilities which drive children, young people and families into the care system in the first instance and the ensuing trauma, loss and adversity they often experience whilst in receipt of services. The Promise is clear that more must be done to support children to remain within the family unit through the provision of family inclusive, rights- based supports which focus upon and promote the ‘wellbeing’ of the whole family unit.

2.5 Rights, Respect & Recovery

The Framework sets out the Government’s national prevention aims on alcohol related harms. The Framework contains four high level outcomes all of which are relevant to this brief, but number three in particular which reads *Getting it Right for Children, Young People and Families.*

The Framework contains three priority actions which will be required to embed this outcome, all of which are relevant to this brief …

1. Ensure family members will have access to support in their own right, and, where appropriate, will be included in their loved one’s treatment and support.
2. Ensure all families will have access to services (both statutory and third sector) provided through a whole family approach, in line with the values, principles and core components of GIRFEC.
3. Involve children, parents and other family members in the planning, development and delivery of services at local, regional and national level.

2.6 Scottish Government National Mission on Drugs Deaths: plan 2022-2026

The aim of the national mission is to *reduce drug deaths and improve the lives of those impacted by drugs.* The Framework is underpinned by a range of priorities, all of which are relevant to the delivery of this Brief and Outcome six in particular, which reads *Children, families and communities affected by substance use are supported.*

In terms of actions to achieve this outcome, the Framework envisages the development of Holistic Whole Family Supports and Family Inclusive Practices.

2.7 Families affected by Drug & Alcohol use in Scotland: a framework for Holistic Whole Family Approaches and Family Inclusive Practice:

This Framework emerged in response to the findings from both the Promise and also the National Mission on Drugs Deaths, both of which advocate for the development of models of Holistic Whole Family Approaches to support children to remain safely within the family unit. The Framework does not endorse a single model of Whole Family Supports, but instead provides the reader with a broad overview of approaches developed across the globe and which may be of value within the Scottish Context.

2.8 Fife Alcohol & Drugs Partnership Strategy 2020-2023:

The ADP’s strategy is underpinned by an analysis and synthesis of national policy drivers (see above) and contains 5 high level priorities to support children and families with or affected by substance use. Priority number three is *Getting it right for children and young people.* There are three priority actions described within the strategy which are seen as essential in this regard, the most relevant to this brief is priority action number one, which reads …

1. Whole Family Support service with those affected by alcohol and drugs and their children to intervene early to prevent statutory measures and to assist the family to recover together.
2. **Service Model**

3.1 The service model should be cognisant of recent evidence and research based on improving outcomes and minimising the impact of parental drug and alcohol use on children, young people and the family. The intention is that the delivery model and interventions will improve outcomes for the whole family and reduce the number of children, young people and families reaching crisis point as a result of substance use and/or other difficulties (ACEs).

3.2 This service is focused on prevention and support for families where there are indicators of significant vulnerability which if not addressed will lead to breakdown, crisis and statutory measures. The critical features of this type of service are:

* Improving children’s wellbeing, safety and resilience
* Addressing substance use and/or other difficulties and supporting recovery
* Improving parenting, family functioning and relationships
* Improving family circumstances including environmental

3.3 The components of the services delivery model should include:

* A whole family wrap around response undertaking a strength/ asset-based assessment of the family and individual members affected by parental substance use and or other substances
* Interventions which reduce risk and minimise harm
* Develops strengths, resilience and personal self-efficacy within the family
* Builds robust, persistent and assertive outreach modes of delivery (working in the home is essential) to support the child, young person or family to achieve recovery-based outcomes
* Builds capacity within the family to prevent long term service dependency
* Adopts an evidence-based approach
* Practical support to develop a family goals/improvement plan (e.g. benefit advice, registration at GP, attendance at appointments)
* Motivates, actively links and acts as a single point of contact for families to services to ensure full and consistent engagement
* Provides equitable service delivery in the evenings and weekends as standard normal office hours including a helpline
* Provides physical and/or online drop in service for all young people across Fife who may or may not initially engage alongside family members, helping to ‘navigate’ the young person towards services including education and employment, diversionary activities and any other support to improve outcomes.
* Adaptive model applying a variety of approaches including pro-social modelling; counselling and practical help to support recovery
* Develops a co-production approach to improve service development and delivery

3.4 Fife Council has commissioned Fife Voluntary Action to lead on a review of existing children and families support which is aimed at establishing the conditions where the views and experiences of children, young people and families are central to system transformation and funding of future children’s services in Fife so that in turn children and families in Fife experience better outcomes and are able to thrive.

3.5 This work is being undertaken using a co-production approach with the involvement of children, young people, and families alongside both third sector and statutory sector providers. The project is in its early stages but is expected to produce recommendations in March 2024. Commissioned Services will be expected to align their own models to the findings from this work as it emerges and adopt recommendations aimed at informing the future planning, design, delivery and commissioning of family support services in Fife.

1. **Outcomes**

4.1 To deliver this brief the service will require an outcomes/performance framework with tools to evidence the progress of children, young people and families based on the impact of interventions. The outcomes for this service are split into three distinct groups based on the support for parents, children, young people and the family unit.

**Outcomes for parents:**

* Improvement in ability to meet children’s wellbeing needs and safety
* Improvement in engagement in treatment with specialist alcohol and drug services to support recovery (i.e. Addiction Services, FASS, DAPL, FIRST etc)
* Improvement in physical health, mental health and emotional wellbeing
* Improvement in connections to local groups/wider networks of support

**Outcomes for Children and Young People**

* Improvement in children and young people experiencing a safe and more stable home environment
* Improvement in children and young people making safer and positive choices
* Improvement in children and young people’s mental health and emotional wellbeing
* Improvement in young people engagement in support services including specialist services leading to a reduction in substance use

 **Outcomes for Families**

* Improvement in safety and risks factors within the family related to public protection issues e.g. domestic abuse, child protection, offending, housing and financial difficulties
* Improvement in relationships within the family and wider family network
* Improvement in the home environment including home conditions
* Improvement in family engagement with services leading to sustainable change and a reduction referral to statutory services

**5. Eligibility & Referral Criteria**

4.1 The service will be provided to families, children and young people throughout Fife within the features outlined in section 3.0

4.2 The Child Wellbeing Pathway is the agreed multi-agency process in Fife to support coordination of services based on single and multi- agency assessments. Child Wellbeing Meetings coordinated by the named person or lead professional will be the mechanism to determine whether children and young people would benefit from access to the service based on an assessment of needs, risks and vulnerabilities. The Intensive Community Support Panel (ICSP) is the forum to prioritise allocation of resources. The successful service provider will be a member of the ICSP and will also be able to both respond and highlight need for children and young people and families who have previously received a service and may require a period of extended support. This pathway will be subject to review in line with the refresh of the multiagency Child Wellbeing Pathway to ensure efficient and effective deployment of resources based on current and emerging need.

**6.Scale & Cost**

6.1 Drawing upon service levels established for the current commissioning cycle (2021-24) and routine monitoring data, it is anticipated that the service will work with **350-400**  children, young people and families per year and that the exact number will be monitored and managed through performance reporting in the Service Level Agreement

6.2 The budget envelope established for the delivery of the Brief is £676,189

**7. Networking & Communication**

7.1 Collaborative working to improve outcomes is a key requirement and the service should have a proven track record of working effectively on a multi-agency basis, building strong relationships with a range of statutory and non-statutory services

7.2 The service should be visible and have a community presence across the 7 localities in Fife, contributing to local networks, sharing good practice and influencing service delivery and development both at a local and strategic level.

7.3 The service should provide detailed information on the service model and interventions raising awareness of provision and the ability to work in a flexible and agile way.

7.4 The service is required to provide senior representation on any relevant strategic ADP subgroup.

**8. Continuity of Care**

8.1 The service provider will be expected to provide consistency of staffing both in levels and personnel for children, young people and families, particularly through periods of absence, sickness and holidays. The service will share their organisation’s comprehensive recruitment, induction and workforce development programme for staff members of this service. This should evidence capacity building with the staff team to use effective evidenced based interventions for the specified groups.

**9. Risk Management**

9.1 For each service user, identify all situations which involve elements of risk to themselves or others, and evidence the planned response which attempts to reduce and control the risk/s.

 9.2 To manage risks effectively the service must have policies and procedures on the following:

* Operational policy reflecting equalities legislation
* Staff absence and management policy
* Recruitment policies and procedures
* Procedure for lone working and working in service users’ homes
* Use of volunteers
* Risk assessment and management
* Dealing with accidents and incidents
* Responding to distress related behaviours
* Protection of vulnerable groups including both an Adult and Child Protection Policy
* Confidentiality Policy
* Training and staff development
* Job description and details of duties
* References and enhanced disclosure check for staff
* Procedures for the supervision, appraisal and disciplinary of staff
* Whistleblowing policy

**10. Recording & Monitoring**

9.1 The service must have a record management system in place compliant with Data Protection guidelines with a workforce who are knowledgeable and competent to record accurately in respect to direct contact and reports for all groups.

9.2 Information regarding the overall service provided may be requested by Fife Council and Fife ADP at any time for example, how many hours have been worked, the type of contact that took place, the work involved, changes to service plans/interventions, complaints, successful/unsuccessful outcomes and the reasons for these.

9.3 Records kept should ensure that information on the outcomes for the service can be collected for evaluation and analytical purposes

9.4 An Agreement Monitoring Meeting will be held every quarter and a report submitted to the meeting by the service.

9.5 The grant will be monitored via Fife Councils Monitoring and Evaluation Framework, a Link Officer will be appointed to work closely with the service. The Link Worker will be supported by the FADP Coordinator or Policy Officer and Social Work Service Monitoring Officer

**11. Complaints**

11.1 For each quarterly Agreement Monitoring Meeting the service provider must provide a report detailing the following information:

* The number of complaints the service provider has had during the previous quarter, by type of complaint
* The number of complaints in respect of service provision funded by the ADP & Fife Council
* The outcome of the service providers investigation
* The number of complaints which were upheld and details on complainants who were satisfied/unsatisfied with the outcome
* General changes to the service providers policies and procedures as a result of complaints and progress with implementing any changes
* The service provider will be required to co-operate in any investigation of a complaint as requested by the FADP and/or the Fife Council and to remedy any concerns that the FADP and/or Fife Council has regarding the provision of the service