

Partnership name Bedfordshire

Adult drug treatment plan 2008/09 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 2008/09 adult drug treatment plan guidance for possible areas to include within this planning grid

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

1. Provide access for clients to a range of wrap around services
2. Implement findings from Needs Assessment around BME Communities
3. Develop the involvement of parents and carers in planning of services
4. Continue to improve Care Pathways, Retention, and Successful Discharges
5. Develop current contractual performance against Best Value ensuring best practice around financial management
6. Ensure there is a clear clinical governance structure in place within current strategic and commissioning processes
7. Ensure implementation of the BDAT Harm Reduction Strategy and improve provision of HEP B/C testing and treatment
8. Develop clear transitional processes between Children and Young People's Services and Adults Services
9. Ensure Diversity issues are addressed across the Treatment System
10. Effective partnership working around DIP
11. Ensure compliance with NDTMS requirements and commission IT systems to meet these and clinical needs of providers
12. Develop a strategy for the implementation of IDTS
13. Consider ways in which improvement can be made in penetration rates of PDU
14. Improve outcomes for individuals health and social functioning
15. Increase numbers of individuals in effective treatment

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

Objective 1

Provide access for clients to a range of wrap around services

Delivery Plan: Actions and milestones	By when	By whom
Develop links and provision with wrap around services, including housing and employment and	On going	JCG

training.		
Ensure attendance on JCG by Housing Providers and employment services	July 2008	JCG Chair
Objective 2 Implement findings from Needs Assessment around BME Communities		
Delivery Plan: Actions and milestones	By when	By whom
Complete an Equality Impact Assessment	Sept 2008	BDAT Commissioner
Ensure representation from BREC on JCG	July 2008	JCG Chair
Translation services available for service providers	Aug 2008	JCG
Recommendations from the Underserved Groups Needs Assessment and BDAT Adult Needs Assessment are progressed	December 2008	JCG/Providers/Service User Working Group
Objective 3 Expand services for parents and carers and develop involvement of parents and carers in planning of services		
Delivery Plan: Actions and milestones	By when	By whom
Continue to provide and monitor service provision for Parents and Families and Grandparents through commissioned services, SPACED, IMPACT and Carers Summer Respite Scheme	Ongoing	DAT team and JCG
Revise the D3 Guide to services in Bedfordshire and disseminate	May 2008	DAT team
Re – design the BDAT Information and Advice Website and re- launch in consultation with Providers and Service Users	June 2008	DAT team and University Placement Student
Implementation of the BDAT Drugs and Alcohol Information Line for the local community and	April 2008	DAT team

promote		
Consultation around involvement of Parents and Carers through the development of the User Involvement model in Bedfordshire	October 2008	Beds CC User Involvement Lead
Objective 4 Continue to improve Care Pathways, Retention, and Successful Discharges		
Delivery Plan: Actions and milestones	By when	By whom
Please see Planning Grids 2, 3, and 4 for detail		
Objective 5 Develop current contractual performance against Best Value ensuring best practice around financial management		
Delivery Plan: Actions and milestones	By when	By whom
Carry out a benchmarking exercise against Tier 2 and Tier 3 to inform review of contract values with providers	September 2008	DAT Contracts and Performance Lead
Investigate introduction of Financial penalties for slow/non performance against targets by providers	June 2008	DAT Contracts and Performance Lead
Objective 6 Ensure there is a clear clinical governance structure in place within current strategic and commissioning processes		
Delivery Plan: Actions and milestones	By when	By whom
Identify a clinical lead to attend the JCG - consult on clinical issues	On going	JCG Chair

Progress protocols around Drug Related Deaths through the BDAT Harm Reduction Strategy	Sept 2008	BDAT Working Group
Objective 7 Ensure implementation of the BDAT Harm Reduction Strategy		
Delivery Plan: Actions and milestones Review progress of Harm Reduction initiatives across service provision against the BDAT Harm Reduction Strategy	Ongoing - quarterly	JCG
Objective 8 Develop clear transitional processes between Children and Young People's Services and Adults Services		
Delivery Plan: Actions and milestones	By when	By whom
Representation of Young People's Services Commissioning at JCG meetings with standing agenda item	May 2008	JCG Chair
Joint work around supporting parents and adults with children accessing Drugs Services	Dec 2008	JCG/YP Commissioner
Protocol reviewed and implemented around Care Pathways between Children and Young People's Services and Adults Services	July 2008	JCG/YP Commissioner
Objective 9 Ensure Diversity issues are addressed across the Treatment System		
Delivery Plan: Actions and milestones	By when	By whom
Develop a BDAT Diversity Action Plan based on Needs Assessment	October 2008	BDAT Commissioner
Database of staff speaking different languages at Tier 2	Aug 2008	Tier 2 Provider

		Addaction
Increased access to services by Eastern European community	March 2009	Service Providers
Increased availability of literature in different languages in services	May 2008	DAT Team/Providers
Further Needs Assessment around issues for service users with disabilities - audit	Dec 2008	Service Providers
Audit access of services by gender – issues for women	Dec 2008	Service Providers
Objective 10 Effective partnership working around DIP		
Delivery Plan: Actions and milestones	By when	By whom
Ensure the attendance of CPS and magistrates courts to the DIP delivery group, police partners to help facilitate this. To monitor representatives attending the DIP delivery group.	Aug 2008	(JCG), DAT DIP Lead & Police
Ensure the DIP specific diversity action plan is delivered through the DIP delivery group. Outcomes to include DIP specific consultation on diversity needs assessment and DIP specific diversity action plan.	July 2008	JCG , DAT DIP Lead & DIP Delivery group (DIP DG)
To lead on clinical management and care pathways of DIP specific treatment across Bedfordshire's treatment system. Outcomes to include agreed care pathways and working protocols.	Ongoing	JCG , DAT DIP Lead & DIP DG
To ensure DIP services are commissioned against DIP need. DIP commissioning takes place at the B:DAT Joint Commissioning Group. Outcomes will include DIP and PPO fast track prescribing, DIP and PPO alignment and provision for Criminal Justice Crack and other stimulant users.	Ongoing	JCG & DAT DIP Lead
Delivery Plan: Actions and milestones	By when	By whom
Objective 12 Develop a strategy for the implementation of IDTS		

Delivery Plan: Actions and milestones	By when	By whom
Meet with NTA rep to confirm expectations	April 2008	Commissioner /DIP Lead
Develop an IDTS Action Plan	June 2008	Commissioner /DIP Lead
Attend regional IDTS Cluster Group Meetings	Ongoing	Commissioner /DIP Lead
Objective 13 Implement strategic plans and commission against improving PDU penetration rates		
Delivery Plan: Actions and milestones	By when	By whom
Please see Planning Grids 2,3 and 4 for details		
Objective 14 Improve outcomes for individuals health and social functioning		
Delivery Plan: Actions and milestones	By when	By whom
Monitor outcomes for individuals through the TOPS system	Ongoing	DAT Team/JCG
Objective 15 Increase numbers of individuals in effective treatment		

Delivery Plan: Actions and milestones	By when	By whom
Please note all actions in this planning grid		

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

Please see checklist at Appendix 1 of the 2008/09 adult drug treatment 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. Ensure implementation of BDAT screening and assessment tools across the treatment system
2. Ensure services are accessible by the diverse community in Bedfordshire
3. Continue to reduce Waiting Times - those in excess of 3 weeks
4. Ensure Care Pathways are functioning to enable rapid referral onto appropriate services
5. Encourage an increase in GP referrals
6. Expand delivery of service provision in the south of the county
7. Expand provision of Needle Exchange provision in the south of the county and across the county in Pharmacy provision
8. Publicity about service provision across the county
9. Ensure mechanisms are in place to aid diverse communities to access treatment locally
10. Expansion of provision and access to services for Criminal Justice clients

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

Objective 1 Ensure implementation of BDAT screening and assessment tools across the treatment system		
Delivery Plan: Actions and milestones	By when	By whom
Review and monitor Screening, Assessment and referral process to inform individuals care plan. To be included in Performance Indicators in Service Contracts. Consult with Service User Advocates to progress this.	Ongoing	JCG, Adult Treatment Managers Group (ATMG) & Practitioners Group (PG) service User Advocates
The implementation of a B:DAT triage form (to include TOP and be used as a generic referral form). Monitor through quarterly contract meetings	June 2008	JCG, ATMG & PG
The revision of the B:DAT comprehensive assessment form.	June 2008	JCG, ATMG & PG
Objective 2 Ensure services are accessible by the diverse community in Bedfordshire		
Delivery Plan: Actions and milestones	By when	By whom
Implement and review the recommendations of the BDAT Needs Assessment		
Complete an Equality Impact Assessment	Sept 2008	BDAT Commissioner
Develop a BDAT Diversity Action Plan based on Needs Assessment	October 2008	BDAT Commissioner
Objective 3 Continue to reduce Waiting Times – focus on those in excess of 3 weeks		

Monitor service provision on a regular basis against targets for Waiting Times	Monthly/ Quarterly	BDAT Team/JCG
Objective 4 Ensure Care Pathways are functioning to enable rapid referral onto appropriate services		
Delivery Plan: Actions and milestones	By when	By whom
Report disseminated results from Care Pathways Event	May 2008	BDAT Commissioner
Care Pathway routes disseminated to all services across all Tier of Provision	Sept 2008	BDAT Commissioner
Meetings held between services to ensure Care Pathways are functioning	Ongoing	BDAT Commissioner and Providers
Objective 5 Encourage an increase in GP referrals	Sept 2008	BDAT Commissioner/JCG/PCT lead
Delivery Plan: Actions and milestones	By when	By whom
Promotion of services with GP's	Aug 2008	BDAT Commissioner/PCT lead
GP liaison – Current Shared Care GP to promote prescribing to GP's as part of a LES	March 2009	Dr Thomas
Funding identified to allocate to GP's interested in prescribing from their practices	May 2008	JCG
Objective 6 Expand delivery of service provision in the south of the county	March 2009	BDAT Commissioner
Delivery Plan: Actions and milestones	By when	By whom

Secure premises already identified in Health Centre in Leighton Buzzard from which to operate the Shared Care Service	June 2008	BDAT Commissioner/JCG
Secure premises already identified in Dunstable for a multi-agency one stop shop	Aug 2008	BDAT Commissioner/JCG
Objective 7 Expand provision of Needle Exchange provision in the south of the county and across the county in Pharmacy provision		
Delivery Plan: Actions and milestones	By when	By whom
Locate static Needle Exchange from one stop shop premises in Dunstable	Oct 2008	BDAT Commissioner/JCG
Expand current provision from Pharmacy Needle Exchange – review re commissioned service for Pharmacy Needle Exchange provision	Ongoing	BDAT Team/JCG
Objective 8 Publicity about service provision across the county		
Delivery Plan: Actions and milestones	By when	By whom
Revise the D3 Guide to services in Bedfordshire and disseminate	May 2008	DAT team
Re – design the BDAT Information and Advice Website and re- launch in consultation with Providers and Service Users	June 2008	DAT team and University Placement Student
Implementation of the BDAT Drugs and Alcohol Information Line for the local community and promote	April 2008	DAT team
Objective 9		

Ensure mechanisms are in place to aid diverse communities to access treatment locally		
Delivery Plan: Actions and milestones	By when	By whom
Ensure translation services are available to aid diverse communities to access treatment	Aug 2008	JCG

Objective 10.
Expansion of provision of and access to services for Criminal Justice Clients

Delivery Plan: Actions and milestones	By when	By whom
Expand provision for DIP clients to access fast track prescribing, psychosocial- talking therapies, complementary therapies and one-to- one case management approaches. To monitor through JCG.	December 2008	JCG, DAT DIP Lead, DIP team and ATMG
To monitor effective deployment of DIP team members in courts and custody. To monitor through JCG and quarterly performance meetings.	Ongoing	JCG, DAT DIP lead. DAT Data & Performance Lead, DIP Team Leader
To develop the prison 'in reach' in HMP Bedford to include meeting clients on day of release and to monitor working protocols with surrounding HM Prisons. To monitor through DIP DG and feedback from DIP Team.	April 2008 Ongoing	DIP DG, DAT DIP Lead & DIP team
To engage individuals with multiple drug tests and multiple arrests into Bedfordshire's treatment system. To monitor through JCG and DIP DG.	August 2008	JCG, DAT DIP Lead, DIP team & Police
To monitor the commencements and waiting times of DIP fast track prescribing. To monitor through JCG and quarterly performance management meetings.	Ongoing	JCG, DAT DIP Lead & DAT Data & Performance Lead
To monitor the DIP & PPO information sharing protocol. To monitor through the JCG, PPO panel and	Ongoing	JCG, DAT DIP Lead,

DIP DG.		PPO panel and DIP DG.
To ensure referral pathways are implemented for those clients from other CJITs, including those subject to a Restriction on Bail (RoB). To monitor through the JCG, DIP DG and Quarterly performance management meetings.	April 2008	JCG, DAT DIP Lead, DAT D Performance Lead & DIP DG.
To monitor the effective communication arrangement for test results and assessments to court. To monitor through the JCG, DIP DG and Quarterly performance management meeting and contract Performance Indicators.	July 2008	JCG, DAT DIP Lead, DAT Data & P Lead & DIP DG.

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

Please see checklist at Appendix 1 of the 2008/09 adult drug treatment 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. Improve the Retention of individuals in Effective Treatment
2. Improve the percentage of clients with a Care Plan
3. Ensure clients have access to information and Harm Reduction Advice to reduce potential harm
4. Ensure Parents, Families and individual's significant others have access to support
5. Improve referral and liaison with other appropriate services including statutory services (Child Protection Services) where there are issues for client's dependant children
6. Increase penetration rates of PDU - Ensure Service providers develop the skills to tackle stimulant, opiate and poly drug use.
7. Ensure continuity of Care for clients between Tier 3, In patient De tox and Residential Rehab.
8. Improve retention of CJIT clients in effective treatment.

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

Objective 1		
Improve Retention Target		
Delivery Plan Actions and milestones	By when	By whom
Develop Retention Rates Action Plan with Service Providers where necessary	May 2008	BDAT Contract & Performance Manager
Investigate Triaged clients only records and amend where appropriate	May 2008	BDAT Contract & Performance Manager
Review DNA processes across the Treatment System	May 2008	BDAT Team
Investigate data recording issues in services where Retention rates are poor	May 2008	BDAT Contract & Performance Manager
Investigate referrals from Tier 2 to Tier 3 and retaining clients across Care Pathways	Aug 2008	BDAT Team
Monitor and review Retention Rates across the Treatment System	Monthly/Quarterly	BDAT Contract & Performance Manager
Objective 2		
Improve the percentage of clients with a Care Plan		
Delivery Plan Actions and milestones	By when	By whom
Review Care Plans across services – include consultation with Service User Advocates on the best model for Care Planning	March 2009	BDAT Contract & Performance Manager/BDAT Commissioner/Service User Advocates
Ensure Care Plans cover physical and psychological health, criminal involvement and offending and social functioning – review through TOPS	On going	BDAT Contract & Performance

		Manager/BDAT Commissioner
Annual audit of Care Plans is undertaken	Feb 2009	BDAT Contract & Performance Manager/BDAT Commissioner
Objective 3 Ensure clients have access to information and Harm Reduction Advice to reduce potential harm particularly around BBV's		
Delivery Plan Actions and milestones	By when	By whom
Monitor provision of Harm Reduction Information across service provision through service contracts	Ongoing	BDAT Contract & Performance Manager
Objective 4 Ensure Parents, Families and individual's significant others have access to support		
Delivery Plan Actions and milestones	By when	By whom
Ensure Services are signposting significant others onto support services like SPACED and IMPACT and other sources of advice such as the BDAT website and other core services. Monitor through Service Contracts	Ongoing	BDAT Contract & Performance Manager/JCG
Objective 5 Improve referral and liaison with other appropriate services including statutory services where there are issues for client's dependant children		
Delivery Plan	By when	By whom

Actions and milestones		
Investigate current referral pathways between Drug and Alcohol Agencies and other services particularly child protection services	July 2008	BDAT Commissioner
Develop working protocols between the above agencies	Sept 2008	BDAT Commissioner/Service providers
Monitor compliance with the above protocols through service contract monitoring	Quarterly	BDAT Contract & Performance Manager/JCG
Increase numbers of referrals to and from the above agencies, to improve joint working. Monitor through service contract monitoring	Quarterly	BDAT Contract & Performance Manager/JCG
Provide training where appropriate to providers of other services around Basic Drugs Awareness and Screening and Assessment procedures	Dec 2008	BDAT Commissioner/Drugs Service Providers
Objective 6 Ensure Service providers develop the skills to tackle stimulant, opiate and poly drug use.		
Delivery Plan Actions and milestones	By when	By whom
Implement interventions in Tier 3 service provision for stimulant users	Aug 2008	BDAT Commissioner/CAN
Introduce mechanisms for retaining stimulant users in treatment based on good practice	Aug 2008	BDAT Commissioner/CAN
Objective 7 Ensure continuity of Care for clients between Tier 3, In patient De tox and Residential Rehab.		

Delivery Plan Actions and milestones	By when	By whom
Clarify Care Pathways between Tier 3 and Tier 4 – monitor through service contract meetings.	July 2008 - ongoing	BDAT Commissioner/JCG
Clarify Care Pathways between Tier 4 and Aftercare - monitor through service contract meetings.	July 2008 - ongoing	BDAT Commissioner/JCG
Objective 8 Improve retention of CJIT clients in effective treatment.		
Delivery Plan Actions and milestones	By when	By whom
Monitor case management approach within the Tier 2 DIP team, with specific attention to the process of movement into Tier 3 services. To monitor through JCG, quarterly performance meeting and contract Performance Indicators and DIP DG.	June 2008 - ongoing	JCG, DAT DIP Lead, DAT Data & Performance Lead & DIP Team
Ensure the implementation and ongoing monitoring of the working protocols between HMP Bedford CARATS, prison Healthcare, DIP and Shared care services. To monitor through JCG and DIP DG.	April 2009	JCG, DAT DIP Lead & DIP DG.
Ensure the implementation and performance management of the DIP & PPO specific fast track prescribing. Monitor through quarterly performance meetings and contract Performance Indicators.	Ongoing	JCG, DAT DIP Lead & DAT Data & Performance Lead
The implementation of DRR working protocol. To be monitored through quarterly performance meetings and contract Performance Indicators.	Ongoing	JCG & DAT Data & Performance Lead
Monitor the referral process and working protocol between Probation and DIP team for clients accessing drug treatment on a community based order. To be monitored through quarterly performance meetings and contract Performance Indicators.	Ongoing	JCG, DAT DIP Lead, DIP DG & DAT Data & Performance Lead

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

Please see checklist at Appendix 1 of the 2008/09 adult drug treatment 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. Extend range of aftercare “move on “and support services offered within drugs services
2. Clarify Care Pathways for clients to housing, education, employment and mainstream health.
3. Ensure BDAT Strategy is linked to the local Homelessness Strategy and Supporting People Strategy
4. Implement recommendations from the BDAT Housing Needs Assessment and Supporting People Homelessness Review
5. Increase Joint Working with Supporting People and Housing providers
6. Improve links into housing provision for DIP clients
7. To increase access to education, training and employment for DIP clients
8. Improve performance in terms of Planned and Unplanned Discharges from treatment – to improve treatment effectiveness
9. Improve access to support and mutual aid groups for those clients who have left structured treatment

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

Objective 1

Extend range of aftercare “move on “ and support services offered within drugs services

Delivery Plan Actions and milestones	By when	By whom
Commission through Supporting People a Housing In Reach Worker Post to support client’s access	April 2008	JCG

to housing and accommodation		
Monitor Housing In Reach Worker Post through joint BDAT and Supporting People Contract management	Ongoing	BDAT Contract & Performance Manager/JCG
Investigate other models of in reach work and commission where appropriate	Nov 2008	JCG
Objective 2 Clarify Care Pathways for clients to housing, education, employment and mainstream health.		
Draw up current Care Pathways for clients to services above.	Aug 2008	BDAT Commissioner
Review and address any issues within current Care Pathways – report to JCG	Oct 2008	BDAT Commissioner
Recommendations for commissioning in reach work to JCG for decision around service provision	Oct 2008	BDAT Commissioner
Objective 3 Ensure BDAT Strategy is linked to the local Homelessness Strategy and Supporting People Strategy	May 2008	BDAT Team
Delivery Plan Actions and milestones	By when	By whom
Review priorities in light of the above strategies for inclusion in the BDAT Strategy	June 2008	BDAT Team
Objective 4 Implement recommendations from the BDAT Housing Needs Assessment and Supporting People Homelessness Review		
Delivery Plan Actions and milestones	By when	By whom

Review recommendations from the above Needs Assessment and implement where possible – review quarterly	Quarterly	JCG
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Objective 5
Increase Joint Working with Supporting People and Housing providers

Delivery Plan Actions and milestones	By when	By whom
Identify specific themes around housing issues for Supporting People Commissioners and Housing Providers on the JCG to progress	May 2008	JCG

Objective 6
Improve links into housing provision for DIP

Delivery Plan: Actions and milestones	By when	By whom
To make links with local Housing providers to ensure that DIP clients get access to appropriate housing to meet their needs. Monitor through JCG and DIP DG.	August 2008	JCG, DAT DIP Lead & DIP DG
To ensure a DIP representative sit on Housing forums to ensure DIP clients needs are taking into account and diversity issues from the DIP Action plan can be shared. Monitor through DIP DG.	April 2008	DAT DIP Lead, DIP Team & DIP DG
To ensure that the needs of DIP and PPO clients are recognised within the proposed Supporting People floating support model. To be monitored through the Adult JCG.	Nov 2008	JCG DAT DIP Lead & DIP DG

Objective 7
To increase access to education, training and employment services for DIP clients.

Delivery Plan: Actions and milestones	By when	By whom
To implement strategic plans and operational protocols with local providers of education, training and employment. To monitor through the Adult JCG.	August 2008	JCG, DAT DIP lead & ATMG
To ensure the needs from the DAT diversity strategy are progressed through the strategic plan and operational working protocols. To monitor through the Adult JCG.	August 2008	JCG, DAT DIP lead & ATMG
Objective 8 Improve performance in terms of Planned and Unplanned Discharges from treatment – to improve treatment effectiveness		
Delivery Plan: Actions and milestones	By when	By whom
Develop Retention Rates Action Plan with Service Providers where necessary	May 2008	BDAT Contract & Performance Manager
Care Pathway routes disseminated to all services across all Tier of Provision	Sept 2008	BDAT Commissioner
Meetings held between services to ensure Care Pathways are functioning	Ongoing	BDAT Commissioner and Providers
Review DNA processes across the Treatment System	May 2008	BDAT Team
Objective 9 Improve access to support and mutual aid groups for those clients who have left structured treatment		
Delivery Plan: Actions and milestones	By when	By whom
Audit current practices around support for those leaving structured treatment	Aug 2008	BDAT Contract & Performance

		Manager /BDAT Commissioner
Clarify Care Pathways from structured treatment to unstructured support	Sept 2008	BDAT Contract & Performance Manager /BDAT Commissioner
Monitor client movement into unstructured support from drug treatment –service contract monitoring	Quarterly	BDAT Contract & Performance Manager