



Llywodraeth Cymru
Welsh Government

Number: WG45470

Welsh Government
Consultation – summary of response

Draft Substance Misuse Treatment Framework - Integrated Substance Misuse Provision Children and Young People

July 2024

Mae'r ddogfen yma hefyd ar gael yn Gymraeg.

This document is also available in Welsh.

Overview

The consultation sought views on the Welsh Government's draft Substance Misuse Treatment Framework (SMTF) for an integrated substance misuse provision for children and young people in Wales.

Action Required

This document is for information only.

Further information and related documents

Large print, Braille and alternative language versions of this document are available on request.

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Additional copies

This summary of response and copies of all the consultation documentation are published in electronic form only and can be accessed on the Welsh Government's website.

Link to the consultation documentation: [Developing a substance misuse treatment framework for children and young people | GOV.WALES](#)

Consultation Summary Report on the draft Substance Misuse Treatment Framework (SMTF) - Integrated substance misuse provision for Children and Young People

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1. Introduction

The consultation sought views on the draft 'Support Misuse Treatment Framework (SMTF) - Integrated substance misuse provision for Children and Young People' (the "framework"). The framework is designed to inform and assist health, social care and criminal justice planners and providers to design and deliver high quality, sustainable and equitable prevention and treatment services for those at risk of or experiencing substance misuse issues.

2. Context

As part of the substance misuse policy agenda, the Welsh Government routinely publishes policies and guidance documents, disseminating this information through the Substance Misuse pages of the Welsh Government website and stakeholders. SMTFs are used to provide guidance and act as reference materials to reduce the harms caused by substance misuse.

The intended audience for the framework includes service planners, commissioners, substance misuse and wider health, criminal justice and social care providers working with those at risk of initiation, or experience of historic or current problematic drug and/or alcohol use. In implementing this SMTF it is therefore expected that children and young people, their families and carers will be involved.

The SMTF provides an overview of the existing situation in Wales and the wider UK and outlines the evidence to inform improvements. Links to relevant strategy and policy documents are provided along with a summary of the evidence relating to required development of services aimed at improving the health and wellbeing of children and young people.

3. Structure of Framework

The framework is structured as follows:

- Summary and key developments.
- Background.
- Pathway for integrated substance misuse service provision.
- Training and workforce development.

4. Pre-Consultation Engagement

To oversee the development of the SMTF the Welsh Government commissioned Public Health Wales (PHW) to develop this framework and a steering group was established in 2018. The evidence within this SMTF is also drawn from a range of

sources including bibliographic databases, website sources, personal communication with leading academics, stakeholder and evidence gathering events and key informant interviews.

Following the first draft, national stakeholder groups were invited to attend two engagement days to agree amendments and final recommendations to the SMTF in the final draft.

PHW, with the support of other professionals contributed to various chapters of the framework. These included:

- Head of Substance Misuse Programme, PHW.
- Project Manager – Substance Misuse and harm reduction, PHW.
- Project Manager – Trends in Substance Misuse, PHW.
- Dual Diagnosis Substance Misuse Practitioner, Specialist Child & Adolescent Mental Health Services, Hywel Dda University Health Board
- Service Manager, Specialist Child and Adolescent Mental Health Service, Hywel Dda University Health Board.
- Service Manager, Pembrokeshire Youth Offending and Prevention Service.
- Flintshire Sorted Young People Drug and Alcohol Team, Flintshire County Council.
- Kinbee Ltd.
- Youth Worker, Cardiff Youth Service.
- Health Promotion Practitioner, Public Health Wales.
- Third Sector Young Persons Substance Misuse Service Team Leader.
- Service Manager, Young People’s Emotional Wellbeing Service.
- North Wales Lead, ACE Aware Wales
- Consultant Addiction Psychiatrist, Aneurin Bevan Health Board Trust
- Third sector Young Persons Substance Misuse Service Manager
- Substance Misuse Commissioner, Cardiff & Vale University Health Board.

Cross Government Approach

There is a focus on embedding substance misuse across a range of other Welsh Government programmes and plans. For example, close joint working will continue with Mental Health, Education, Children and Families, Employability, Housing, Social Services, Tackling Poverty and Crime and Justice to strengthen links with these areas.

The Substance Misuse Delivery Plan 2019-22 supports a key theme of ‘Prosperity for All: the national strategy’ which is to improve health and well-being in Wales, for individuals, families and communities, helping us to achieve our ambition of prosperity for all, by taking significant steps to shift our approach from treatment to prevention.

In addition, the vision and principles set out in ‘A Healthier Wales: our Plan for Health and Social Care’ apply to this framework.

The SMTF also references the NEST/NYTH and Whole School Approach frameworks, both of which provide the tools to move towards a genuine Whole

System Approach, broadening the offer of support across Wales, in order to deliver transformational change to services.

5. Consultation

On 30 September 2022, the Welsh Government published the draft Substance Misuse Treatment Framework (SMTF) - Integrated Substance Misuse Provision Children and Young People for consultation. The consultation ran for a period of 12 weeks and closed on 23 December 2022. The full text of the consultation is available at:

[Developing a substance misuse treatment framework for children and young people | GOV.WALES](#)

This document provides a summary of the consultation responses received through the online consultation.

- In total, 30 responses to the consultation were received.
- 10 respondents selected to remain anonymous.
- Figure 1 below provides a summary of the organisations that responded to the consultation.



6. Summary of consultation responses

A thematic analysis of the 30 responses was undertaken. A summary of the issues and points raised by stakeholders are set out below. Not all respondents answered all questions. The consultation was made up of four key questions:

Q1 This draft Substance Misuse Treatment Framework (SMTF) is designed to inform and assist health, social care and criminal justice planners and

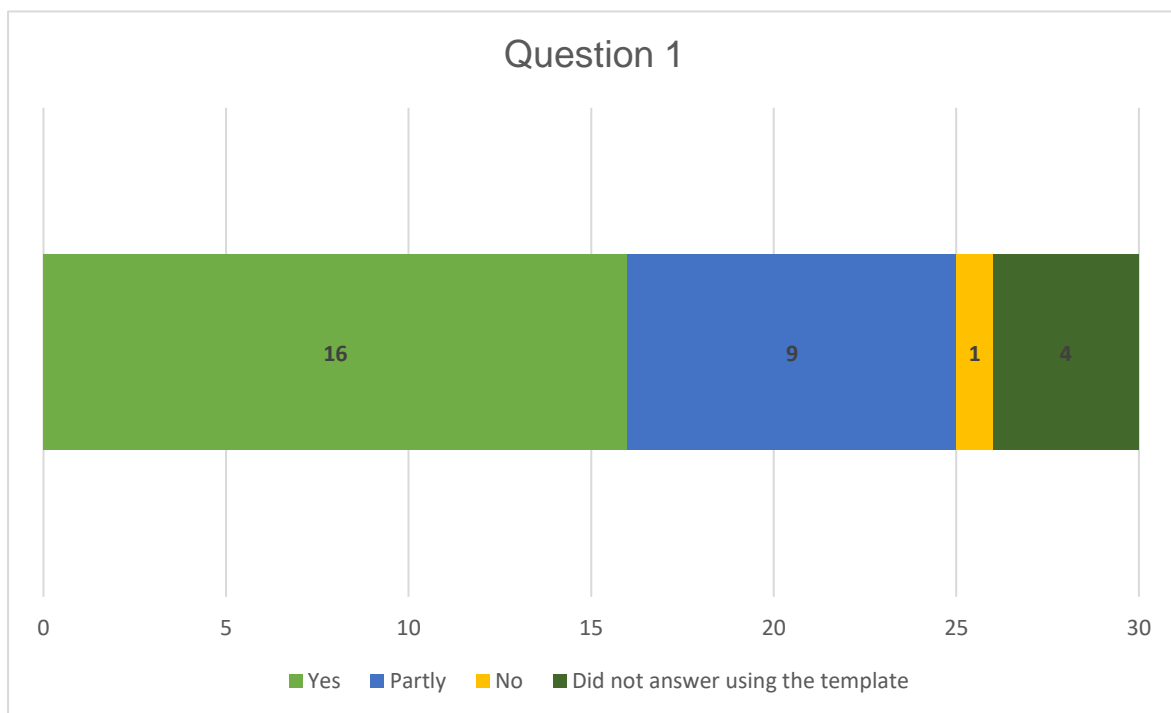
providers to design and deliver high quality, sustainable and equitable prevention and treatment services children and young people, specifically for those at risk of, or experiencing substance misuse issues. Would you agree the draft SMTF does this?

- Q2** Do you agree the recommendations, as they are proposed in Section 1, are fit for purpose and achievable?
- Q3** Do you see any service delivery challenges in delivering any of the recommendations?
- Q4** In your view, does the proposed SMTF link well with other relevant policy and service areas?

In addition to gaining the above answers, it was also imperative to gain more insight into the given answers. Therefore, each question was followed with a sub question asking individuals to explain their answer in more depth. This allowed specific comments to be taken on board in the final framework that has been published alongside this summary report.

7. Key Findings

Question 1 - This draft SMTF is designed to inform and assist health, social care and criminal justice planners and providers to design and deliver high quality, sustainable and equitable prevention and treatment services children and young people, specifically for those at risk of, or experiencing substance misuse issues. Would you agree the draft SMTF does this? The chart below sets out the number of responses that agreed with Question 1.



The main themes that emerged were in relation to **better supporting those with co-occurring substance misuse and mental health needs** and **more focus on harm reduction and preventative work**. There was specific mention surrounding certain substances such as prescribed medication, nitrous oxide and new psychoactive substances.

Lack of join up between substance misuse and mental health services. **Police**

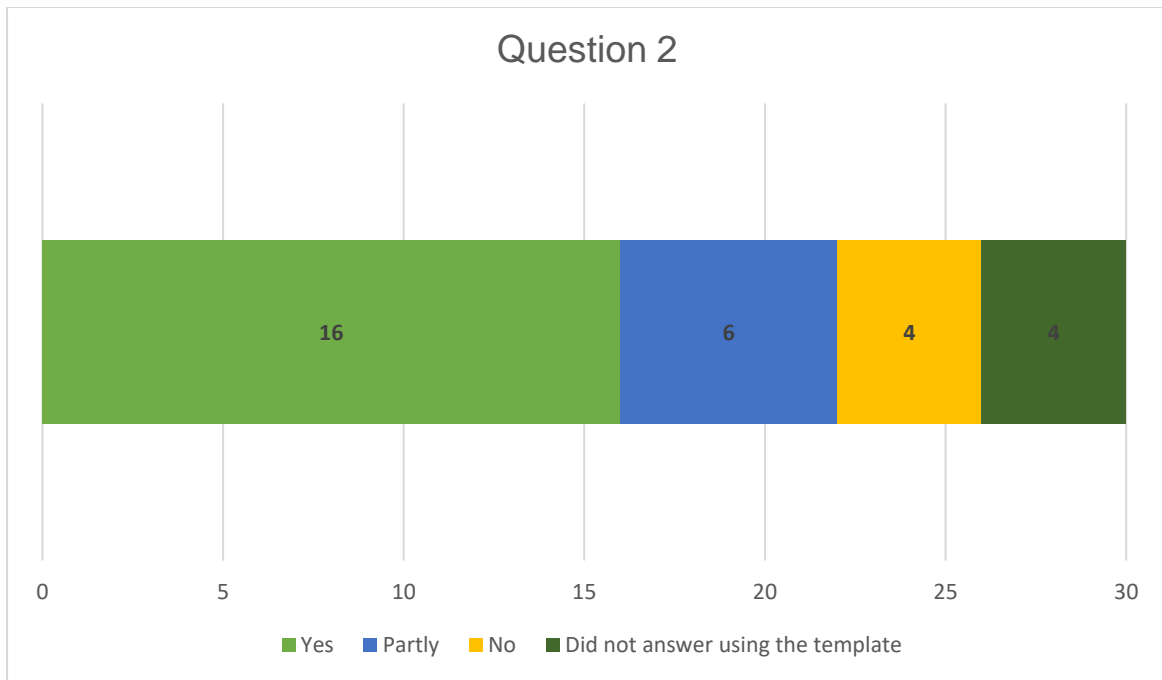
Consistency between mental health and drug and alcohol services would also be beneficial to support those with co-occurring support needs in terms of upper age limit (25yrs). **APB**

The report doesn't give mention to public drug use and harm reduction around 'public drug consumption etiquette' and the lack of awareness that there is in young people using injecting drugs. **Third Sector Organisation**

It would be advantageous to see a stronger reference to prevention work, taking a holistic approach to the issues. Understanding what triggers the behaviours and then targeting specific interventions. Including young people themselves to unlock what helps prevent is vital, and it will differ according to age group. **Police**

Across our young people's services we have seen a sharp increase in the use of nitrous oxide (NOS) with little current harm reduction knowledge around its effects (psychological and physical). The report also does not give enough focus to ingestible and smoked drugs such as MDMA, cannabis and legal highs, which are prevalent amongst young people. **Third Sector Organisation**

Question 2 - Do you agree the recommendations, as they are proposed in Section 1, are fit for purpose and achievable? The chart below sets out the number of responses that agreed with Question 2.



The main themes were in relation to the **use of a database and a unified assessment**. There was support for both, however, there were questions surrounding their effectiveness and how they will work in practice.

Practitioners widely report that WCCIS (Welsh Community Care Information System) as a system is slow and has weekly, if not daily disruption time. This system needs to be free from such disruption if it is to be utilised as an all-Wales system. **Health Board**

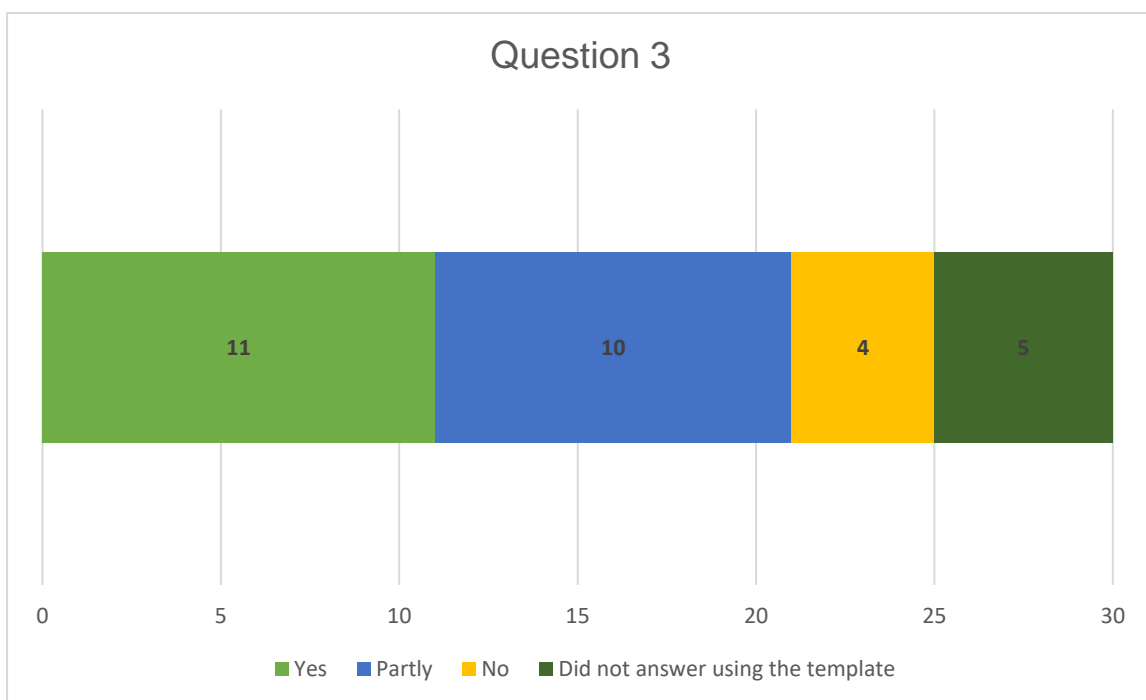
WCCIS may not be accessible to all and a unified assessment tool would be difficult to implement as every region/ locality may have different criteria. How will a unified assessment be created? **APB**

Given the difficulty in creating a system which unifies patient records across primary and secondary care, a tool which could be used by all professional encountering young people seems unrealistic. The College is concerned that any such system would exclude GP records, which would create a further barrier for a GP to provide whole person care to young people, particularly those who are vulnerable and at risk of substance misuse or abuse. **Royal College of General Practitioners**

We are concerned about the potential impact of implementing a single electronic assessment tool. There are concerns about a service's/practitioner's ability to interrogate a system like this to gather adequate information regarding a case, and that this could create a static system that is not adaptive and responsive to individual cases and their needs. **Third Sector Organisation**

Implementation of an electronic unified and modular assessment – we feel that good multi-agency working can prevent these issues, when assessments are shared between services so a young person does not have to repeat themselves when they meet new professionals. Additionally, there may be issues with ‘modular’ assessment tools being too prescriptive – for example in CAMHS (Children and Adolescent Mental Health Services) assessments, there a number of “boxes” to fill in which may not be relevant to every professional body – additionally different professionals may complete the form very differently. **APB**

Question 3 - Do you see any service delivery challenges in delivering any of the recommendations? The chart below sets out the number of responses that agreed with Question 3.



The main themes were in relation to **resource constraints** and the **need for staff training**.

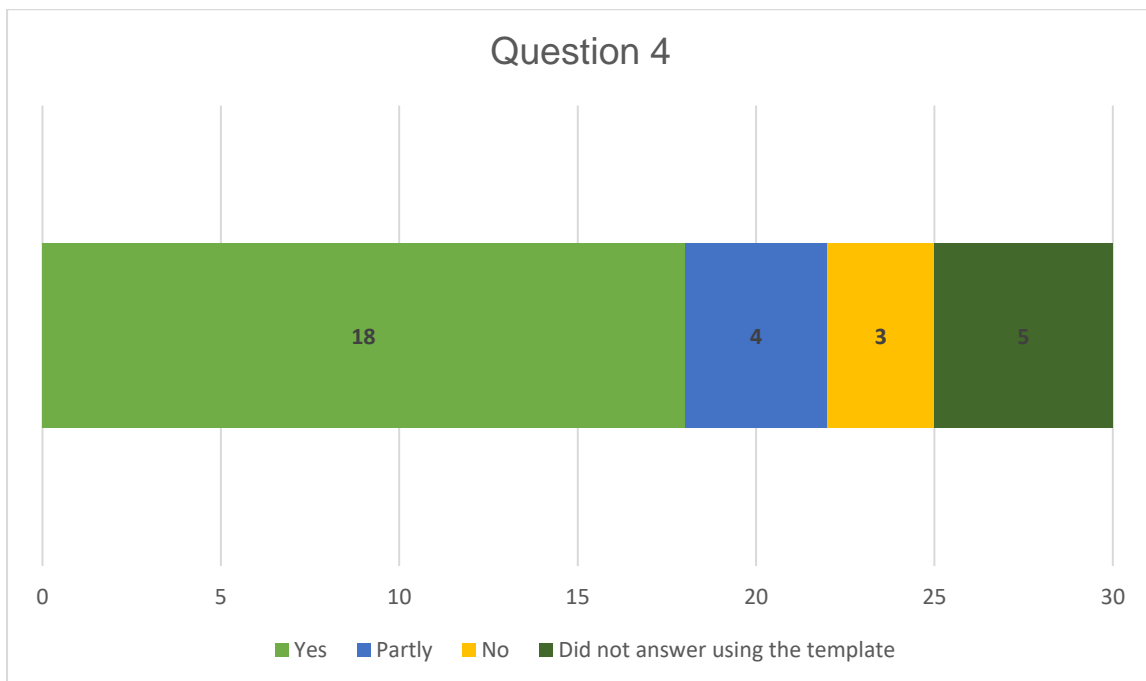
Extending all services to support up to age 25 needs additional resource commitments, potentially additional training for existing service providers and possible changes to delivery. Its vital that these considered and factored in to ensure all people who access services are not impacted negatively. **APB**

As part of the approach to revisiting the SMTF, we would urge Welsh Government to invest in new efforts to ensure that children’s social care – and substance misuse treatment in particular - is viewed as an attractive career opportunity that is well-paid, respected and supported. This should include support for training and education, and a campaign focusing on the huge contribution of the social care sector to the lives of children and young people. **Third Sector Organisation**

The need for increasing the numbers of qualified professionals e.g. pharmacists (including Independent Prescribing pharmacists), and the provision of advanced training to enhance the skills of their team members e.g. key workers. **Royal Pharmaceutical Society**

There is no existing qualification or professional accreditation for staff interested in pursuing a career in substance misuse treatment. This can lead to difficulties in recruiting and retaining staff who are attracted to a career that offers a recognised level of professional development. **Third Sector Organisation**

Question 4 - In your view, does the proposed SMTF link well with other relevant policy and service areas? The chart below sets out the number of responses that agreed with Question 4.



The main themes related to the requirement for **join up between substance misuse and mental health** as well as general comment regarding **responsibility and accountability of the framework's recommendations**.

Feedback from people using substance use services is that accessing Mental Health services can be difficult, and mental health support is often not accessible until individuals have addressed their substance use. **APB**

...It is not clear how the recommendations will be implemented and what the governance arrangements will be. **Police**

Within roles and responsibilities, I was wondering whether there would be any merit in saying that the responsible authorities that make up the APBs are responsible for the delivery of the SMTF, with support from, and in partnership with, the Welsh Government and third sector organisations? This may help to provide a clearer line of accountability, especially considering that Health Boards, Criminal Justice and Local Authorities are included in the responsible authorities that make up the APB. It could then be the APB that could be held to account should some of the aspects of the SMTF not be delivered, which APBs could be reasonably expected to ensure delivery on. **Individual**

Question 5 – We would like to know your views on the effects that the draft SMTF would have on the Welsh language, specifically on opportunities for people to use Welsh and on treating the Welsh language no less favourably than English. What effects do you think there would be? How could positive effects be increased, or negative effects be mitigated?

Of those who responded to this question, there was strong support for the use of bilingual materials. The overarching consensus was that bilingual materials and services would have a positive effect, including encouraging those who speak Welsh to enter treatment and providing choice of language where applicable.

I believe that children/adolescents should be able to access the support and treatment they need in Welsh as they may feel more comfortable accessing the information in the language in which they are taught, especially as some may struggle with certain terminology in English. This could also help parents to discuss the information/treatment more readily if the family home's first language is Welsh. The positive effect would be that children would have a choice to read and understand the treatment/support in whatever language they chose which leads to improved outcomes. **Individual**

This would encourage Welsh speakers to access the service using the Welsh language and support children and young people (CYP) in this group to use SMTF by validating their preferred language. **Health Board**

There is a concern that there is a limited amount of any Welsh speakers available when someone presents at a service. **Third Sector Organisation**

Question 6 – Please also explain how you believe the proposed SMTF could be changed so as to:

- have positive effects or increased positive effects on opportunities for people to use the Welsh language and on treating the Welsh language no less favourably than the English language, and
- have no adverse effects on opportunities for people to use the Welsh language and on treating the Welsh language no less favourably than the English language.

The SMTF should be published in both languages, with people given an option of which one to use. **Anonymous**

The recommendations could be strengthened to include cultural promotion and language preference (Welsh and English) in service delivery and design. **Wales Safer Communities Network**

Question 7 - We have asked a number of specific questions. If you have any related issues which we have not specifically addressed, please use this space to report them.

Some responses echoed previous comments laid out above. In addition, there were numerous comments surrounding preventative work and early engagement.

There is a need to curtail online harm and raise awareness about drugs sold online. Preventing drug misuse is more cost effective and socially desirable than dealing with the consequences of misuse (Dame Carol Black independent Review, <https://www.gov.uk/government/publications/review-of-drugs-phase-two-report>)

Royal Pharmaceutical Society

ADHD Autism is also a factor to be considered, as many adults present with these issues later in life at SMS (substance misuse service) clinics and crisis hubs. Trauma informed mental health is a growing concern where young people often use substances, to mask the effects of the underlying concern. G.P is relied on too heavily, also Childrens mental health services. It needs to be a community of professionals working together a whole systems approach easy access. **Local authority**

There is clear emphasis on integration of services and referral of young people with specialist needs to appropriate services and indeed mention of using integrated care pathways (ICP) to ensure young people have access to appropriate substance misuse services irrespective of their current team. However, there is more work needed to address the commissioning gaps: children and young people already known to services for other mental illnesses are at risk of and do sometimes develop problematic substance use. It is important either to have specialist substance misuse professionals integrated into child and adolescent mental health services or develop clear shared care provision between CAMHS and services dedicated to managing young people with substance misuse problems. We are really pleased that the document recommends use of ICP to address issues like these and suggests single point of referral. However, in areas such as transition and ongoing substance use challenges in children already accessing mental health services, sample pathways should be included in this document. **Third Sector Organisation**

8. Next Steps

From evaluating the consultation responses, the framework has been updated to include comments and recommendations, where appropriate, received from all 30 respondents. Strengthened wording in relation to the Welsh language has also been added, to help ensure Welsh language is treated no less favourably than the English language.

Key themes in relation to better join up between mental health and substance misuse services, training, harm reduction and preventative work, unified assessment tools and accountability were raised. Further consideration will need to be given to ensure the most appropriate delivery of these services within the challenging financial landscape. The Welsh Government will continue to work with its partners on how to best to achieve this through its existing governance structure.