

Service	Support Delivery of Drug Rehabilitation Requirement	Version	P3.0
Document	Service Specification	Sign-off Complete	MCB OCT



Service Specification for

Support Delivery of the Drug Rehabilitation Requirement

Service Specification Document

This document defines the service, including the required outcome(s) and outputs. As part of an SLA or Contract, the national minimum outputs in this document are mandatory for all providers. The document can also contain optional outputs that are available for Commissioners to commission.

1. Service Specification Document

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Version Control Table		
Version No.	Reason for Issue / Changes	Date Issued
P1.0	Preview Publication	29/03/2011
P2.0	Go-Live Publication, references updated	01-10-2011
P2.1	Service element amended from "Offenders are tested for illegal drugs" to "Offenders access testing for illegal drugs", to reflect the fact that whilst the delivery of treatment is out of scope, ensuring that it is available is in scope.	23/01/2012
P.2.	Supporting documents: reference to operating model, cost spreadsheet and direct service costs and assumptions removed, as these are now outdated.	20/01/2014
P 3.0	Reviewed as part of general updating, no changes were currently required	12/6/2017

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Service Specification for Support Delivery of Drug Rehabilitation Requirement:

1.	Service Name	Support Delivery of Drug Rehabilitation Requirement
2.	Key Outcome(s) for Service	<ul style="list-style-type: none"> • Successful completion of treatment • Reduction in or elimination of illegal drug use • Reduction in offending by those under the Drug Rehabilitation Requirement (DRR)
3.	Definition of Service	<p>Under Section 209 of the Criminal Justice Act 2003, a DRR, comprising structured treatment and regular drug testing, is available to courts as a sentencing option for offences committed on or after 4 April 2005. A DRR can be made as part of a Community Order or a Suspended Sentence Order (SSO) for a minimum period of six months and a maximum of three years. It must be supervised by a suitably qualified or experienced individual. Before making the requirement, the court must be satisfied:</p> <ul style="list-style-type: none"> • The offender is dependent on or has the propensity to misuse illegal drugs • The offender requires and would benefit from treatment • Necessary arrangements have been or can be made for treatment • The offender expresses his/her willingness to comply with the requirement <p>The DRR can be used for low, medium and high sentencing bands. The amount and intensity of the drug treatment delivered under the DRR can be tailored to individual treatment needs regardless of the seriousness of the offence. The content and duration of the total Community Order should provide the overall restriction of liberty which is commensurate with the seriousness of the offence.</p> <p>Under Section 210 of the Criminal Justice Act, the court may provide for the review of any DRR and must do so in the case of requirements lasting twelve months or more. The review should take the form of a written report to be provided to the court which includes the results of the offender's drug tests.</p>

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4.	Service Elements In Scope	<ul style="list-style-type: none"> • Offenders access and attend treatment which meets the quality standards specified by the National Offender Management Service (NOMS) and matches order intensity and treatment need • Offenders access testing for illegal drugs • Information is shared • Offenders are supported through treatment
5.	Out of Scope	<ul style="list-style-type: none"> • The delivery of the treatment (which is not normally undertaken and never funded by Probation Trusts) is undertaken by providers commissioned by local Drug and Alcohol Action Teams (DAATs) • The negotiation of funding arrangements with DAATs (England) and Local Health Boards (Wales) and other service providers • The management of the requirement, including sentence planning and enforcement which are included in the Manage the Sentence for a Community Order or Suspended Sentence Order service specification
6.	Dependent Service Elements	Arranging appointments in line with national standards which are included in the Supervision Requirement. NOMS guidance stipulates a DRR should never be proposed without an accompanying Supervision Requirement.
7.	Strategic Context	<p>There is a strong link between drug misuse and acquisitive crime. Research suggests that drug users commit between a third and a half of all acquisitive offences. They are over-represented in the prison system and are more likely than other prisoners to die in the early stage of a sentence or shortly after release.</p> <p>The National Treatment Outcome Research Study (NTORS) followed 1,000 drug users through their treatment and identified a significant reduction in crime. It concluded that expenditure on drug treatment leads to significant savings on the health and social costs associated with drug misuse. These findings were reinforced by a number of other studies. This stimulated Government investment in drug treatment, notably the Drug Intervention Programme, DRRs, the Criminal Justice Integrated Team (CJIT) and the Integrated Drug Treatment System (IDTS) in prisons.</p> <p>The Government's Drug Strategy (Dec 2010) sets out three main themes: reducing demand, restricting supply and building recovery in communities.</p> <p>Current strategic issues:</p> <ul style="list-style-type: none"> • Current Government policy which supports a move from a harm reduction approach to one of abstinence/recovery

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		<ul style="list-style-type: none"> • Current Government policy of reducing short prison sentences. These are often used for drug misuse offenders and this approach could lead to an increase in DRR numbers, including ones where the offender does not meet the targeting criteria (for example, recreational cocaine users) • Drug treatment for women: women do better than men in completing drug interventions but the design needs to take account of their complex needs as highlighted in the Corston Report (2007) • Black and minority ethnic: research suggests that this group is under-represented in treatment. There is a need for equality of access and sensitivity to faith, cultural and gender considerations • Effective partnership working between the many voluntary and statutory agencies involved with drug users especially in a period of reducing resources and efficiency savings often accompanied by organisational restructuring • Dual diagnosis: The Bradley Report (2009) recommends the diversion of offenders with mental health needs out of the Criminal Justice System into community-based treatment provision • Continuity of case management between community and custody: treatment programmes delivered in prison are not necessarily reinforced after release
8.	<i>Flexibility</i>	All the outputs in this specification are mandatory – referred to as the National Minimum
9.	<i>Reference to Supporting Documents</i>	None.

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10.	Example Measurement/ Assurance Method for Commissioners	<p>The specification identifies examples of methods for Commissioners to measure/obtain assurance on the delivery of the outputs/output features. Where an output/output feature does not have Performance Indicator(s) or Management Information associated with it, then it is proposed that it should be covered by Assurance Statements and Contract/SLA Management and/or more specific audits of the service.</p> <p>Assurance Statements will be one of the means by which Commissioners can get assurance that providers are delivering outcomes and outputs of the Service Specification. Contract/SLA Management refers to the Commissioner, under the terms of the Contract/SLA, exercising appropriate oversight and monitoring of Contract/SLA compliance against the service as a whole, including site visits, file inspections and review meetings. Audit may refer to individual reviews of compliance commissioned by Commissioners or to service wide reviews, by MOJ Internal Audit and Assurance, of a key process contributing to the delivery of an outcome in a Service Specification.</p> <p>Security Audit, Race Equality Prisoner Audit and Self Harm Audit all feature as separate elements within the Prison Rating System (PRS).</p>
11.	References for Detailed Mandatory Instructions	<p>Criminal Justice Act 2003, Section 209</p> <p>National Standards for the Management of Offenders (2011).</p> <p>PI 14/2011 Delivery of Drug Treatment Requirement</p>
12.	References for Non-Mandatory Guidance	<p>PC56/2005 – Delivering Intensive Community Orders under the Criminal Justice Act 2003</p> <p>PC57/2005 – Effective Management of the Drug Rehabilitation Requirement and Alcohol Treatment Requirement (ATR)</p> <p>National Standards for the Management of Offenders (2011): Practice Framework</p>
13.	Review Cycle	Review cycle to be determined.

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Specification

National Minimum

Row	Service Element	Outputs / Output Features	Applicable Offender Types	Policy Theme	Example Measurement/ Assurance Method for Commissioners	References for Detailed Mandatory Instructions	References for Non-Mandatory Guidance
1.	Offenders access and attend treatment which meets the quality standards specified by NOMS and matches order intensity and treatment need.	The offender commences the specified treatment within the prescribed timescales.	Offenders subject to DRR	Substance Misuse	Contract Management and/or Internal Audit	Criminal Justice Act 2003; Section 209 PI 14/2011 Delivery of Drug Treatment Requirement	PC57/2005: Effective Management of the DRR and ATR' Page 15
2.	Offenders access and attend treatment which meets the quality standards specified by NOMS and matches order intensity and treatment need.	The offender is instructed to attend for treatment in accordance with the level of intensity of the requirement.	Offenders subject to DRR	Substance Misuse	Contract Management and/or Internal Audit	Criminal Justice Act 2003; Section 209 PI 14/2011 Delivery of Drug Treatment Requirement	PC57/2005: Effective Management of the DRR and ATR' Pages 4, 15 & 16
3.	Offenders access and attend treatment which meets the quality standards specified by NOMS and matches order intensity and treatment need.	The offender manager contributes to continuous assessment and care planning to ensure the offender accesses the most appropriate treatment.	Offenders subject to DRR	Substance Misuse	Contract Management and/or Internal Audit	Criminal Justice Act 2003; Section 209 PI 14/2011 Delivery of Drug Treatment Requirement	

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Row	Service Element	Outputs / Output Features	Applicable Offender Types	Policy Theme	Example Measurement/ Assurance Method for Commissioners	References for Detailed Mandatory Instructions	References for Non-Mandatory Guidance
4.	Offenders access and attend treatment which meets the quality standards specified by NOMS and matches order intensity and treatment need.	If a concern arises, statutory Safeguarding responsibilities are discharged.	Offenders living with or having significant contact with a child	Public Protection Safeguarding Children	Contract Management and/or Internal Audit	PI 14/2011 Delivery of Drug Treatment Requirement	Monroe Review 'Working Together' guidance
5.	Offenders access testing for illegal drugs.	The offender manager ensures that the offender is regularly tested for the drugs primarily associated with their offending.	Offenders subject to DRR	Substance Misuse	Contract Management and/or Internal Audit	Criminal Justice Act 2003; Section 209 PI 14/2011 Delivery of Drug Treatment Requirement	PC57/2005: Effective Management of the DRR and ATR' Pages 21-24
6.	Offenders access testing for illegal drugs.	The offender manager ensures that the offender is intermittently tested for other drugs to identify polydrug use.	Offenders subject to DRR	Substance Misuse	Contract Management and/or Internal Audit	PI 14/2011 Delivery of Drug Treatment Requirement	PC57/2005: Effective Management of the DRR and ATR' Page 23
7.	Offenders access testing for illegal drugs.	Drug tests and results are recorded.	Offenders subject to DRR	Substance Misuse	Contract Management and/or Internal Audit	Criminal Justice Act 2003; Sections 209 and 210 PI 14/2011 Delivery of Drug Treatment Requirement	PC57/2005: Effective Management of the DRR and ATR' Page 22

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8.	Information is shared.	Attendance at treatment sessions is monitored in accordance with a consistent framework agreed between the offender manager and the treatment provider.	Offenders subject to DRR	Substance Misuse	Contract Management and/or Internal Audit	PI 14/2011 Delivery of Drug Treatment Requirement	PC57/2005: Effective Management of the DRR and ATR' Page 16
9.	Information is shared.	There is prompt liaison between the offender manager who holds the Community Order and the Treatment Worker who is responsible for the care plan on risks presented by the offender and any changes to these.	Offenders subject to DRR	Public Protection	Contract Management and/or Internal Audit	PI 14/2011 Delivery of Drug Treatment Requirement	NOMS Risk of Serious Harm Guidance – June 2009
10.	Information is shared.	Arrangements are made for review hearings to be conducted in cases where they are mandatory or are ordered at the discretion of the court.	Offenders subject to DRR	Substance Misuse	Contract Management and/or Internal Audit	Criminal Justice Act 2003; Section 210 PI 14/2011 Delivery of Drug Treatment Requirement	PC57/2005: Effective Management of the DRR and ATR' Page 19
11.	Offenders are supported through treatment.	Offenders are given comprehensive information about arrangements for treatment.	Offenders subject to DRR	Substance Misuse	Contract Management and/or Internal Audit	PI 14/2011 Delivery of Drug Treatment Requirement	Compliance Best Practice Guide: Performance Improvement Unit (2008)

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12.	Offenders are supported through treatment.	Offenders are provided with feedback on their progress by the offender manager and Treatment Provider and assisted in planning for appropriate treatment to continue after the end of the requirement.	Offenders subject to DRR	Substance Misuse	Contract Management and/or Internal Audit	PI 14/2011 Delivery of Drug Treatment Requirement	