



DANOS Level 4

Report on Research into the Need for Level 4 Qualifications and National Occupational Standards for the Drugs and Alcohol Field

Prepared by The Management Standards Consultancy

December 2005

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Executive Summary

The Drugs and Alcohol National Occupational Standards (DANOS) are widely used and recognised and candidates are beginning to register for the new Level 3 Health and Social Care Scottish and National Vocational Qualifications (S/NVQs) which contain the DANOS units. Skills for Health, the health Sector Skills Council, has been funded by the UK Coordinating Group of the Education Regulatory Bodies to investigate whether there is a need for Level 4 qualifications for advanced practitioners in the drugs and alcohol field and, if so, how such qualifications should be structured.

During November and December 2005, The Management Standards Consultancy carried out initial research, which included:

- a review of current literature
- an e-mail survey of commissioners, employers and workers
- telephone interviews with key stakeholders
- an expert group meeting with policy makers, commissioners, employers and their representatives.

The research identified that **there is demand for a level 4 qualifications for three groups of workers:**

- **directors and managers** of services
- **team leaders, supervisors and coordinators** of services
- **senior practitioners** – those who clearly have a practitioner role, but have greater experience than their colleagues and provide mentoring, coaching and/or supervisory support.

It also identified the following **gaps in Drug and Alcohol National Occupational Standards (NOS) that may need to be filled** if qualifications are to be provided (these NOS may exist in other frameworks):

- Work with substance misusers who have complex needs
- Manage outreach services
- Provide services that are inclusive and engaging
- Assess and manage risk within services
- Develop and manage strategies to retain clients within their care plans.

Recommendations

This report makes four recommendations to the project steering group.

Recommendation 1: Level 4 Qualification for Senior Practitioners

To meet the needs of senior practitioners, a competence-based Level 4 qualification should be developed. This could be a four-unit **Continuing Development Award** comprising two *mandatory* units:

- Contribute to the development of the knowledge and practice of others
- Work with substance misusers who have complex needs

and two *optional* units from a choice of five:

- Support and challenge workers on specific aspects of their practice
- Assess and manage risk within services
- Develop and manage strategies to retain clients within their care plans
- Develop and disseminate information and advice about substance use, health and wellbeing
- Contribute to the development of organisational policy and practice.

Alternatively, it could be a substance misuse pathway within a **Level 4 Health S/NVQ**, comprising four *mandatory* units (these are identical to the mandatory units in the Level 4 Health and Social Care NVQ):

- Develop practices which promote choice wellbeing and protection of all individuals
- Take responsibility for the continuing professional development of self and others
- Use and develop methods and systems to communicate, record and report
- Contribute to the development and maintenance of healthy and safe practices in the working environment

and four *optional* units from a choice of seven:

- Contribute to the development of the knowledge and practice of others
- Support and challenge workers on specific aspects of their practice
- Work with substance misusers who have complex needs
- Assess and manage risk within services
- Develop and manage strategies to retain clients within their care plans
- Develop and disseminate information and advice about substance use, health and wellbeing
- Contribute to the development of organisational policy and practice.

This would require the investigation into whether NOS already exist around the areas of:

- Work with substance misusers who have complex needs
- Assess and manage risk within services
- Develop and manage strategies to retain clients within their care plans

If no NOS exist these may need to be developed.

Recommendation 2: Level 4 Qualification for Team Leaders

Team leaders, supervisors and coordinators should be encouraged to select appropriate units from the **Level 4 Health and Social Care S/NVQ** to meet their needs.

Consideration should be given to adding/developing new units to add to the options available in the Level 4 Health and Social Care S/NVQ covering:

- Manage outreach services
- Provide services that are inclusive and engaging
- Assess and manage risk within services.

Recommendation 3: Level 4 and 5 Qualifications for Managers

Service managers should be encouraged to look at **existing Level 4 and Level 5** qualifications to meet their needs. These may include:

- Level 4 Health and Social Care S/NVQ, which already includes all the units required by Registered Care Home Managers
- Level 4 & 5 Management and Leadership S/NVQs
- Level 3 & 4 S/NVQs in Managing Volunteers
- Professional management qualifications, such as those offered by the Chartered Management Institute or the Institute of Leadership and Management
- Postgraduate management qualifications, such as Certificate/Diploma in Management Studies, MBA, MPA etc offered by a range of Higher Education institutions.

Recommendation 4: Qualifications for Specialist Therapists

Units of NOS covering the range of specialist therapies identified should **not** be developed. Practitioners wishing to offer these therapies should receive appropriate training, supervision and qualifications from the specialist institutions and associations involved.

Background

Since 2000, Skills for Health (SfH) and its predecessor Healthwork UK have worked in conjunction with key stakeholders to develop National Occupational Standards (NOS), Scottish and National Vocational Qualifications (S/NVQs) and Vocationally Related Qualifications (VRQs) for those working in the drugs and alcohol field. The Drugs and Alcohol National Occupational Standards (DANOS) are widely used and recognised and candidates are beginning to register for the new Health and Social Care S/NVQs which contain the DANOS units.

In November 2005 Skills for Health appointed The Management Standards Consultancy to carry out further work to investigate whether there is a need for a Level 4 qualification for the drug and alcohol sector. This would involve work to:

- identify whether such a level 4 qualification already exists that meets the needs of the sector
- establish any gaps between existing qualifications at level 4 and what the sector needs
- identify which functions/standards should go into a level 4 qualification if a need is established
- identify whether the standards that should be contained in such a qualification exist already, and if not to develop and test additional standards as required
- ensure that identified standards (including existing and any newly developed standards) are included in relevant existing level 4 qualifications and/or develop a new strand within an existing qualification e.g. the Health (or Health and Social Care) Level 4 NVQ and/or the development of new qualifications if required

The work has been divided into three work packages with the first focusing on providing evidence of whether a Level 4 qualification is needed and what it should cover. This work package consists of:

- a review of current literature
- a e-mail survey of commissioners, employers and workers
- telephone interviews with key stakeholders
- an expert group meeting with a group of policy makers, commissioners, employers and their representatives.

This report summarises this research and makes evidence-based recommendations for the development of a number of new units of NOS and for their inclusion in existing and new qualifications.

This is a key milestone, and at this point the steering group may decide that there is not a strong enough case for the development of new units; in such circumstances the project can cease at this point.

Results

Literature review

The literature review aimed to investigate the areas of activity at the senior practitioner level which are not covered in the current suite of DANOS. The review considered the key developments in the substance misuse sector in the period since the current suite of DANOS units were developed. The literature considered has been drawn from previous DANOS projects, the National Treatment Agency for Substance Misuse (NTA) and the Home Office Drugs Strategy Directorate (DSD) and their counterparts in Wales, Northern Ireland and Scotland.

The key areas identified were included in the questionnaire survey of commissioners, employers and workers and were commented on in the telephone interviews with key stakeholders and in the Expert Group meeting.

The literature review resulted in the identification of key areas of practice which are:

- not currently addressed in DANOS
- addressed in part in existing units but may warrant a more in-depth treatment where activities are carried out by more experienced or senior practitioners
- areas of practice which have broadly generic units at level 3, but which may require units which describe more specific activities or models of practice at level 4

The key areas of practice identified were:

- Psychosocial therapies, with specific areas which may require units including:
 - Cognitive-Behavioural Therapy
 - Motivational Enhancement Therapy
 - Coping Skills Training
 - Relapse Prevention
 - Family Therapy
 - Community Reinforcement Approach
 - 12-Step Facilitation
- Assertive outreach and management of outreach, with specific areas which may require units including:
 - Managing outreach services
 - Delivering assertive outreach services
- Working with substance misusers in criminal justice settings
- Working with substance users with multiple co-morbidities or severe and enduring mental illness
- Engagement and retention, with specific areas which may require units including:
 - Carrying out structured induction of clients
 - Developing and maintaining therapeutic alliances
 - Developing and managing client retention strategies
- Risk assessment and management
- Consultation and involvement of service users and communities

Telephone interviews

Key stakeholders were identified and e-mailed and rung to request a telephone interview. Interviews were requested with representatives from:

- NTA
- DSD
- Service users
- Scottish Executive
- Welsh Assembly
- National membership organisations
- Professional bodies
- Sector skills councils

The interviews took place over two weeks in November and December 2005. Within the short time frame of the consultation period it was possible to arrange and conduct ten interviews.

Interviewees were first asked whether there was a need for a level 4 qualification. If they answered in the affirmative they were asked what staff they felt this might be for, and what areas of practice the qualification should address.

In general, there was support for development of units at level 4 for use in qualifications such as continuing development awards, for performance management and for use in training and education programmes.

There were concerns that a level 4 NVQ may result in the level 3 NVQ being ignored as services would aim to achieve the highest possible qualification for staff rather than the qualification which appropriately reflected the staff member's practice. Some interviewees were also worried that having a level 4 qualifications as well as a level 3 qualification would result in two tiers of staff, with those with level 3 being seen as less competent or skilled. However, these concerns were expressed as part of a general concern that DANOS and qualifications related to DANOS were not properly understood or used in the sector and that there remained a need for a communications strategy which addressed these misunderstandings.

The majority of interviewees felt that there were staff who were operating at a more senior level. This was identified as being either staff who were operating as team leaders or as senior practitioners or clinicians. These staff were thought to be operating at the interface between management and practice. For example, they may not have line management responsibility for staff but may be involved in providing clinical supervision and the coaching of more junior staff. They may also take responsibility for working with clients with a range of more complex needs.

Fewer interviewees commented on suggested units as a number did not have a practice or clinical background and did not feel able to comment. Those who did comment on units suggested in the survey questionnaire addressed those which they **did not** think should be developed. This was based on the belief that units which described an area of practice which had generic qualifications or training opportunities available should not be developed, eg specific models of counselling. Generally, interviewees felt that units which focused on

working with service users with more complex needs, and on carrying out activities which develop others and the organisation should form the basis for any level 4 qualification.

Stakeholder questionnaire survey

As part of this work package, Skills for Health e-mailed a questionnaire to about 800 contacts in the drugs and alcohol field, to gauge the interest in a Level 4 qualification for advanced practitioners and consider what it should contain.

Out of 167 responses, 86% were in favour of having a Level 4 qualification, but they were divided about who it should be for. Many felt that it would reward front-line workers, for whom the Level 3 qualification has already been developed. Those who considered it would be appropriate for more senior staff saw three main groups of staff who need a higher level qualification:

- directors and managers of services (168 workers in the sample)
- team leaders, supervisors and coordinators of services (105)
- senior practitioners – those who clearly have a practitioner role, but have greater experience than their colleagues and provide mentoring, coaching and/or supervisory support (192).

There are already Level 4 and Level 5 management qualifications (as well as professional qualifications and HE awards) that are relevant to directors and managers of services. The Health and Social Care Level 4 NVQ covers most of the requirements of the second group (team leaders, supervisors and coordinators of services).

The third group, senior practitioners, are those whose needs are less well met by current qualifications. Their job is characterised by:

- being practitioners themselves and needing the competences of their less experienced colleagues
- having a greater depth of experience, knowledge and skills which allow them to work effectively with more complex cases
- being required to share their extensive experience, knowledge and skills with more junior colleagues.

Some of their requirements are met by units from the Health and Social Care Level 4 NVQ, but they also need units covering:

- Provide structured induction to the service for clients
- Assess and manage risk within the service
- Develop and maintain therapeutic alliances with individuals
- Carry out comprehensive substance misuse assessment (which only exists in the Level 3 NVQ)
- Develop and manage strategies to retain clients within their care plans.

The conclusion from the survey was that consideration should be given to developing an award that meets the needs of these senior practitioners and offers them a clear career path, whilst remaining in practice (rather than going into management).

Respondents to the survey also identified a wide range of further areas where units of NOS may be needed, including:

- clinical audit
- commissioning (there are standards for this, but not all of them have been included in the Health and Social Care NVQ Level 4)
- harm reduction (especially BBV)
- other therapies
- shared care with primary care services
- prescription monitoring
- research
- supporting peer-led mentoring
- structured day programmes
- addressing whole person needs.

Expert group meeting

Representatives from users, government agencies, commissioners, service providers, professional associations and sector bodies, were invited to the Expert Group meeting on 12 December 2005 to:

- feedback initial research findings
- provide the time for a more in depth consultation with key representatives from the sector
- discuss the possible business case for a level 4 qualification
- draw together recommendations to put forward to the Steering Group.

The Expert Group was presented with the background to the project and the results of the literature review, telephone interviews and the questionnaire survey.

The group discussion initially focused on who a level 4 qualification might be for and what type of qualification might be most appropriate.

The staff who might need a level 4 qualification were thought to be:

- managers
- team leaders/coordinators
- senior clinical practitioners

These terms were used as shorthand, but it was recognised that staff undertaking these roles had a wide variety of job titles.

In addition it was thought that DAT coordinators and commissioners required a qualification, but this may be at a level beyond level 4.

The types of qualification that might be most appropriate included:

- the Level 4 Health and Social Care S/NVQ
- a substance misuse pathway within a Level 4 Health S/NVQ
- a cluster award such as a Continuing Development Award (CDA).

It was also thought that any units developed could be used to influence the development of professional qualifications.

Following identification of the staff who might undertake a level 4 qualification, participants split into three groups with each group identifying units which might comprise a level 4 qualification. One group identified units for managers, another for team leaders and the third

units for senior clinical practitioners. Annex Five outlines the units each group attributed to a role.

During the feedback session, it became clear that the units identified for managers and team leaders were similar. This led to a discussion on the difference between team leaders and managers and how the roles of team leaders and senior clinical practitioners can be differentiated from those of a manager. The group concluded that team leaders might have responsibility for supervising and coaching staff, but would not have line management responsibility. Similarly, they may have responsibility for developing an aspect of a service, but would not have overall management or strategic responsibility for this. Senior clinical practitioners may also have a coaching role, but not a line management one, and they may be a member of staff who provides care for service users who have more complex needs, or who provides day-to-day advice to other staff who work with service users with complex needs.

The group concluded that team leaders and senior clinical practitioners are staff who are working at the interface between practice and management.

The Expert Group also clearly identified that some of the units outlined in the survey questionnaire should not be developed. This was due to consideration that some suggested units were of a generic nature, ie that the activity is not specific to the substance misuse sector and that therefore qualifications are available in the mainstream. This included the units relating to different types of psychosocial therapies and to working with substance misusers in criminal justice settings.

There was considerable discussion about whether a specific unit is required covering *Consult and involve service users and the community*; the prevailing view was that this should be integrated into the performance criteria of other units, rather than being described as a separate function.

Summary of findings

The literature review and the survey questionnaire identified areas of practice which do not currently have units of competence associated with them or which may require further units of competence which describe activities carried out a higher level of competence.

The telephone interviews and the survey questionnaire revealed support for the development of level 4 qualifications and units of competence which would be used in qualifications.

The telephone interviews, survey questionnaire responses and Expert Group meeting all identified the same groups as possibly benefiting from a level 4 qualification:

- directors and managers of services
- team leaders, supervisors and coordinators of services
- senior practitioners – those who clearly have a practitioner role, but have greater experience than their colleagues and provide mentoring, coaching and/or supervisory support

Identification of relevant units and qualifications also revealed similar findings across the three methods of consultation.

Relevant qualifications included a Level 4 Health and Social care S/NVQ or pathway through the Level 4 Health S/NVQ. There was also a demand for shorter cluster awards.

A range of new units were identified as being appropriate for inclusion in a level 4 qualification. A number of these are already in existence within the Level 4 Health and Social Care National Occupational Standards. There was particular support from survey respondents for use of the Level 4 Health and Social Care S/NVQ mandatory units as core to any level 4 qualification.

The survey respondents identified the need for units of NOS covering the following functions not described by existing units of DANOS (see survey report for details of levels of support):

- Provide structured induction to the service for clients
- Assess and manage risk within the service
- Develop and maintain therapeutic alliances with individuals
- Develop and manage strategies to retain clients within their care plans
- Work with substance misusers who have multiple comorbidities or severe and enduring mental illness
- Consult with and involve service users and the community
- Manage outreach services
- Deliver assertive outreach services
- Work with substance misusers in criminal justice settings
- Deliver cognitive-behavioural therapy
- Deliver relapse prevention therapy
- Deliver motivational enhancement therapy
- Deliver family therapy
- Deliver community reinforcement approaches
- Deliver 12-step facilitation
- Deliver coping skills training

The expert group identified the need for units of NOS covering the following areas:

- Work with substance misusers who have complex needs
- Manage outreach services
- Provide services that are inclusive and engaging
- Assess and manage risk within services
- Develop and manage strategies to retain clients within their care plans.

The units concerning the delivery of psychosocial therapies and working in criminal justice settings were felt to be addressed by existing generic qualifications which are widely available to staff in substance misuse services.

The above titles are provisional only, and the detailed content of any such units would need to be specified in the second work package of this project. For example, it was felt by members of the Expert Group that senior practitioners may require a more advanced care planning unit which takes a broader view of the care plan and guides the service user (and family, carers and community, where appropriate) along a care pathway from initial engagement with treatment services, through retention in treatment to an exit (or maintenance) strategy.

Recommendations

From the research undertaken in this first work package, there would appear to be sufficient demand for Level 4 qualifications for advanced practitioners in the drugs and alcohol field for work to proceed to the next phase of development of the qualifications and any new units of NOS required.

Recommendation 1: Level 4 Qualification for Senior Practitioners

To meet the needs of senior practitioners, a competence-based Level 4 qualification should be developed. This could be a four-unit **Continuing Development Award** comprising two *mandatory* units:

- Contribute to the development of the knowledge and practice of others
- Work with substance misusers who have complex needs

and two *optional* units from a choice of five:

- Support and challenge workers on specific aspects of their practice
- Assess and manage risk within services
- Develop and manage strategies to retain clients within their care plans
- Develop and disseminate information and advice about substance use, health and wellbeing
- Contribute to the development of organisational policy and practice.

Alternatively, it could be a substance misuse pathway within a **Level 4 Health S/NVQ**, comprising four *mandatory* units (these are identical to the mandatory units in the Level 4 Health and Social Care NVQ):

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and four *optional* units from a choice of seven:

- Contribute to the development of the knowledge and practice of others
- Support and challenge workers on specific aspects of their practice
- Work with substance misusers who have complex needs
- Assess and manage risk within services
- Develop and manage strategies to retain clients within their care plans
- Develop and disseminate information and advice about substance use, health and wellbeing
- Contribute to the development of organisational policy and practice.

This would require the possible development of new units of DANOS (after investigation to see if these NOS exist in other frameworks) covering:

- Work with substance misusers who have complex needs
- Assess and manage risk within services

- Develop and manage strategies to retain clients within their care plans

Recommendation 2: Level 4 Qualification for Team Leaders

Team leaders, supervisors and coordinators should be encouraged to select appropriate units from the **Level 4 Health and Social Care S/NVQ** to meet their needs.

Consideration should be given to developing new units (or investigating whether these units exist in other frameworks) to add to the options available in the Level 4 Health and Social Care S/NVQ covering:

- Manage outreach services
- Provide services that are inclusive and engaging
- Assess and manage risk within services.

Recommendation 3: Level 4 and 5 Qualifications for Managers

Service managers should be encouraged to look at **existing Level 4 and Level 5** qualifications to meet their needs. These may include:

- Level 4 Health and Social Care S/NVQ, which already includes all the units required by Registered Care Home Managers
- Level 4 & 5 Management and Leadership S/NVQs
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- Professional management qualifications, such as those offered by the Chartered Management Institute or the Institute of Leadership and Management
- Postgraduate management qualifications, such as Certificate/Diploma in Management Studies, MBA, MPA etc offered by a range of Higher Education institutions.

Recommendation 4: Qualifications for Specialist Therapists

Units of NOS covering the range of specialist therapies identified should **not** be developed. Practitioners wishing to offer these therapies should receive appropriate training, supervision and qualifications from the specialist institutions and associations involved.

Annex One: Literature review document list

1. NTA (2004) Treatment effectiveness: 1. demonstration analysis of treatment surveillance data about treatment completion and retention.
2. Department of Health & NTA (2004) Co-morbidity of substance misuse and mental illness collaborative study.
3. NTA (2004) Reducing drug related deaths – Guidance for drug treatment providers.
4. NTA (2005) Nurse prescribing in substance misuse.
5. NTA (2005) Roles and responsibilities of doctors in the provision of treatment for drug and alcohol misusers.
6. NTA (2005) Retaining clients in drug treatment – A guide for providers and commissioners.
7. NTA (2005) Tier 4 drug treatment in England: Summary of inpatient provision and needs assessment.
8. NTA (2004) Research into practice: 4. More than just methadone dose: enhancing outcomes of methadone treatment with counselling and other psychosocial and ‘ancillary services.
9. NTA (2004) Research into practice: 5. Engaging and retaining clients in drug treatment.
10. NTA (2005) Treatment effectiveness: 2. Treatment outcomes: what we know and what we need to know.
11. NTA (2005) Research briefing: 8. Drug misuse treatment and reductions in crime: findings from the National Treatment Outcome Research Study (NTORS).
12. NTA (2005) Research briefing: 9. Opiate detoxification in an inpatient setting.
13. NTA (2005) Research briefing: 10. A national survey of retention in rehabilitation services.
14. NTA (2005) Research briefing: 11. The effectiveness of psychological therapies on drug misusing clients.
15. NTA (2005) Business Plan 2005/06: Towards treatment effectiveness.
16. NTA (2005) Care planning toolkit: Consultation draft
17. NTA (2005) Consultation report: Models of care for the treatment of adult drug misusers - Update 2005.
18. NTA (2004) Models of care for alcohol misusers
19. Audit Commission (2004) Drug Misuse 2004
20. Drug and Alcohol Findings issue 12 (2005) Can we help? Manners Matter part 2.
21. Scottish Executive Effective Interventions Unit (2005) Service provision for Drug users in rural and remote areas of Scotland: a qualitative study.

22. Scottish Executive Effective Interventions Unit (2005) Scoping the options for future research on psychosocial interventions.
23. Scottish Executive Effective Interventions Unit (2005) Evaluation of the Scottish Prison Services Transitional care initiative. Interim Findings – client interviews and monitoring data.
24. Welsh Assembly Government (2005) All Wales Training Needs Analysis Final Report

Annex Two: Stakeholders interviewed by telephone

Kay Evans	Substance Misuse Intervention Branch	Assembly for Wales
Ruth Fowler	Workforce Programme Manager	National Treatment Agency for Substance Misuse
John Marletta	Training Officer	Alcohol Focus Scotland
Sean Murphy	Training Officer	Alcohol Concern
Jan Palmer	Nurse Consultant	Health and Offender Substance Misuse, Women's Prisons Partnerships – NOMS
Ian Robinson	Chief Executive	EATA
Carol Sharma	Workforce Planning Manager	National Treatment Agency for Substance Misuse
Simon Shepherd	Chief Executive	Federation of Drug and Alcohol Professionals
Laura Sly	Training Officer	Adfam
Pamela Spalding		Home Office Drugs Strategy Directorate

Annex Three: Respondents to survey questionnaire

Anne Rathbone Associates Training And Consultancy
ADAS
Addaction
Addaction Bedford
Adfam
Alcohol Strategy Co-ordinator
ANA Treatment Centre
Avon & Wiltshire health Trust / Criminal Justice Interventions Team
Avon & Wiltshire Mental Health Partnership NHS Trust
Axe Street Project
BADAS
Barnsley DIP
Basingstoke drugs Service.
Bath Area Drug Advisory Service
Beckare
Bedford Hospital NHS Trust
Birmingham & Solihull MHT
Bolton Salford and Trafford MHT Trafford SMS
BRO-SIS African Caribbean Organisation
Brynawel House Alcohol Rehabilitation Centre
Caerphilly Local health Board/Community safety Partnership
CAIS
CARAT -WGCADA - HMP Parc
Care Council for Wales
CDP Arena – Hull DIP
Cheshire Drug Alcohol and Action Team (DAAT)
CIC Substance Misuse Services
City of Edinburgh Council – Health and Social Care
Clinical Directorate for Substance Misuse
Clouds
Clouds Professional Education, Training & Research
Community Addictions Unit, Cardiff and Vale NHS Trust
Community Drug and Alcohol Centre
Compass
Contact NRS
Cornwall DAT/ Cornwall Partnership HNS Team
County Durham DAAT training team
county Durham PCT's
Cygnet Health Care
DAAT
Darlington PCT
DASL (Drug & Alcohol Service for London)
Devon Partnership NHS Trust
DISC
Double Impact
Drug Intervention Programme Kensington & Chelsea
DRUGLINE LANCASHIRE LTD
Druglink
Drugsproject@st-annes
Edinburgh Stimulant Users' Service
EDP – Drug & Alcohol Services (Young People's Service)
Education for Health (formerly NRTC)
Enjin Training and Consultancy y
Ethnic Minority Centre
Focus 12
Freedom Counselling and Training Services
Fusion/Newport YOT
GDAS
Global Solutions Ltd HMP Wolds
Greig House Addiction Services -
Salvation Army
GSL
Hertfordshire Alcohol Problems Advisory Service
Hertfordshire Partnership NHS Trust – N
W Herts. CDAT
Hettys & WAM
Hill Logan Limited
HMP and YOI Parc
HMP Forest Bank - UKDS
HMYOI Lancaster Farms (Juvenile Substance Misuse Service)

Housing Benefits- London Borough of Newham
HYAS Ltd (shell company offering locum services of director to DAT's)
ICP ARC Ltd
Inclusion Drug and Alcohol Services, South Staffordshire NHS Trust
LDASS
Learning and Development Adviser Leicestershire Community Drug and Alcohol Services
Leicestershire, Leicester and Rutland DAAT.
Lewisham PCT
Lifeline Kirklees
Lifeline Kirklees – Children young peoples and families service
Lifeline Middlesbrough
LIFELINE PRISON SERVICES
Lighthouse Project (North West)
Linda Wright Associates Ltd
Linda Wright Assocs Ltd
Littledale Hall therapeutic Community
Make A Change
Merton daat
Multiple Choice
Nacro
New Forest District Council
NewLink Wales
NORCAS
NORCAS
Norfolk DAAT
North East Substance Team
Northamptonshire Drug & Alcohol Services
Northern District Support Agency
NTA
NTA
Options
Oxfordshire User Team
Parental Drug Awareness Service
Pen Yr Enfys
Phoenix House
Portsmouth Teaching Primary Care Trust
Positive Steps Oldham – Oldham and Tameside DAAT's

Prism
RAPt
Rotherham PCT Drug Stretgy Team
Safer Leeds Drugs Team (formerly Leeds Drug Action Team)
Scottish Prison Service
SERCO
Shared Care Drug Services
SHARP, 11 Redcliffe Gardens, London SW10 9BJ
Sheffield Safer Communities Partnership
Substance Misuse (formally DAT)
Shetland Community Drugs Team
Shropshire County PCT
Shropshire DAAT
SLAM South London & Maudsly Trust
SMART-CJS
South Devon Drug and Alcohol Service
South London & Maudsley..Blackfriars CDAT
SPACE YPSMS
St Mungo's
Staffordshire County DAAT
Stockport Drug Action Team
Stockton Drug Interventions Team
Substance Misuse Management in General Practice (SMMGP)
Supporting Futures
Sussex DAATs
Swansea Drugs Project
Swansea NHS Trust
Swanswell Charitable Trust: Drug Solutions Birmingham
Thames Valley University
The Caleb Project
The Chemical Dependency Centre
The Eden Lodge Practice.
The Novas Group
The Pierpoint Group
The Salvation Army
The Sanctuary, Cornerstone Network
The Social Partnership
The Social Partnership (p2w Wirral)
Together – Working for wellbeing
Tony Walsh Associates Ltd
Turning point

Turning Point
Turning Point - Base 10
UKDS HMP Forest Bath
University of Huddersfield
University of Nottingham
University of Ulster
University of Wales - NEWI
Vale of Glamorgan Council
Wakefield Integrated Substance Misuse
Services
Warrington Hospital NHS Trust
WDP
WDP (STEP)
Welcome
West Kent Substance Misuse Services
Westminster Drug Project
West Glamorgan Council on Alcohol and
Drug Abuse
WGCADA
Wirral DAAT
Workforce Development Unit - Bradford
York College
YPSMS Worcester

Annex Four: Participants at Expert Group meeting

Iain Armstrong	Alcohol Advisor (Workforce Development)	Department of Health
Trevor Boutall	Consultant	The Management Standards Consultancy
Robert Clasper-Todd	Training Manager	Addaction
Daphne Dial	Learning and Development Manager	Turning Point
Suzanne Fisher	Project Manager	Skills for Health
Chris Flook	Training Officer	Phoenix House
Ruth Fowler	Workforce Programme Manager	National Treatment Agency for Substance Misuse
Fiona Hackland	Consultant	The Management Standards Consultancy
Susan Hart	Learning and Development Officer	Government Office East Midlands
Jan Mayor		BADAS
Sean Murphy	Training Officer	Alcohol Concern
Daniel Rider	Training Manager	In-volve
Ian Robinson	Chief Executive	EATA
Angela Sharp	Programme Manager	Skills for Justice
Simon Shepherd	Chief Executive	Federation of Drug and Alcohol Professionals
Ruth White	Project Manager	Scottish Executive

Annex Five: Expert group defined roles and allocated units

The roles and related units listed were identified by the Expert Group. Units in italics are not developed in the Health and Social Care suite of standards. Those not in italics currently exist in the Health and Social Care NVQ at level 3 and/or level 4 (level given in brackets)

Clinical Practitioner

- Contribute to the development of organisational policy and practice (level 4)
- *Assess and manage risk within services*
- Develop and disseminate information and advice about substance use, health and wellbeing (level 4)
- Support and challenge workers on specific aspects of their practice (level 4)
- Contribute to the development of the knowledge and practice of others (level 4)
- *Work with substance misusers who have complex needs*

Team Leader

- Develop practices which promote choice wellbeing and protection of all individuals (level 4)
- Take responsibility for the continuing professional development of self and others (level 4)
- Contribute to the development and maintenance of healthy and safe practices in the working environment (level 4)
- Promote and manage a quality provision (level 4)
- Lead teams to support a quality provision (level 4)
- Contribute to the development of organisational policy and practice (level 4)
- Represent one's own agency at other agencies meetings (level 4)
- Develop joint working agreements and practices and review their effectiveness (level 4)
- Contribute to the selection, recruitment and retention of staff (level 4)
- Ensure individuals and groups are supported experiencing significant life events (level 4)
- Support and challenge workers on specific aspects of their practice (level 4)
- *Assess and manage risk within services*
- Develop and disseminate information and advice about substance use, health and wellbeing (level 4)
- *Develop and manage strategies to retain clients within their care plans*
- *Consult and involve service users and the community*
- *Manage outreach services*
- Manage requests for healthcare services (level 4)
- Develop, implement and review programmes of support for carers and families (level 4)
- *Ensuring services provided are inclusive and engaging*

Manager

Defined by the group as the person(s) with line management responsibility for people and the design and delivery of an area of service.

- Develop practices which promote choice wellbeing and protection of all individuals (level 4)
- Take responsibility for the continuing professional development of self and others (level 4)
- Use and develop methods and systems to communicate, record and report (level 4)
- Contribute to the development and maintenance of healthy and safe practices in the working environment (level 4)
- *Consult and involve service users and the community*
- Contribute to the development of organisational policy and practice (level 4)
- Manage a service which achieves the best possible outcomes for the individual (level 4)
- Promote and manage a quality provision (level 4)
- Manage requests for healthcare services (level 4)
- Develop joint working agreements and practices and review their effectiveness (level 4)
- Represent the agency in courts and formal hearings (level 4)
- Represent one's own agency at other agencies meetings (level 4)
- Contribute to the selection, recruitment and retention of staff (level 4)
- Lead teams to support a quality provision (level 4)
- Contribute to the development of the knowledge and practice of others (level 4)
- *Assess and manage risk within services*
- *Develop and manage strategies to retain clients within their care plans*
- *Manage outreach services*