

## SERVICE SPECIFICATION for: Multi Systemic Therapy (MST)

### Document revision control

Version	Author/editor	Notes	Date Published
V1.	Adrian Hobson		Oct 2017

**Document Authors: Adrian Hobson, Ben Finley**

**Date of document: October 2017**

**Date of specification review: April 2018**

## **1. Purpose**

This specification reflects the vision, principles and strategic objectives of the Barnsley Children and Young People's Trust which are to:

*Ensure every child and young person is as healthy as possible, feels safe and secure, learns as much as they can both academically and for pleasure, feels part of and able to contribute to their communities, and grows up knowing that they can earn enough money to have a decent life and support themselves and their own families in the future.*

The aim of this specification is to provide a comprehensive service response for the delivery of Multi Systemic Therapy. Training will be delivered in line with the MST licence requirements and the team will be appropriately trained.

The Council is responsible for commissioning safe, cost effective and sustainable services and will develop and implement robust contract monitoring systems to ensure that high quality standards are maintained.

The Council will consult regularly with key stakeholders to gather and collate information that the Council can analyse and use to pursue continuous improvements and efficiencies in service provision and commissioning ensuring services meet the needs of service users effectively.

## **2. Background**

MST is an intensive family and community based intervention for children and young people aged 11-17, where young people are at risk of out of home placement in either care or custody and families have not engaged with other services. The key goals of MST are to break the cycle of anti-social behaviours by keeping young people safely at home, in school, and out of trouble.

MST teams focus on the whole world of the young person - their homes and families, schools and teachers, neighbourhoods and friends. MST staff go to where families live and work with them intensively for three to five months, including being on call to families 24 hours a day, seven days a week.

MST therapists aim to:

- work intensively with parents or carers to empower them with the tools and resources to manage the young person's behaviours;
- increase young people's engagement with and success in education and training;
- promote positive activities for parent and young person;
- reduce young people's offending and/or anti-social behaviour;
- improve family relationships;
- tackle underlying problems in the young person or parent, including substance misuse.

Cost savings are achieved by targeting youth, who are at imminent risk for out-of-home placement, and then successfully preventing placement, while preserving community safety.

### **3. Service Objectives**

An MST team has been operational within Barnsley since 2008 and Barnsley Metropolitan Borough Council (The Council) are the licence holders for this service.

Sheffield City Council wish to have their own MST team to operate across the city and this team will be a duplicate of the existing team operating in Barnsley, both in terms of staff structure and capacity. Both teams will be employed by Barnsley Council and programme managed by the Youth Justice Service Manager in Barnsley to provide consistency and the purpose of this specification is to formalise that arrangement.

### **4. Scope and Outputs**

The service will provide an MST team consisting of a Supervisor, four Therapists and a Family Engagement worker for which programme management will be provided by the Youth Justice Service Manager within the Council. This team will have the capacity to deliver a service to 50 young people per year, pro rata as a mature team.

The Team Supervisor will be responsible for the allocation of cases within their team under the direction of the Programme Manager. The capacity of the new team will be solely for the use of Sheffield City Council.

Should any member of the team become unavailable, due to maternity leave or long term illness, then Sheffield City Council will have the option of either accepting the reduced capacity within the team during that period or of funding additional staffing to bring the capacity of the team back up to a full complement.

Sheffield City Council will pay a fee to the Council for the delivery of these services which will include an element for the programme management of the team. Details of fees are included in Appendix 1 – Fee Structure.

#### **The services will be expected to:**

Outputs (number/quantity)

Provide a service to 50 families each year referred by Sheffield City Council that is successful in the primary objective of keeping children living in their home and in secondary objectives of

- Supporting families to take responsibility for the care of their children
- Improved family functioning
- Improving the attainment and attendance of children in education
- Preventing children from being involved in crime and anti-social behaviour
- Reduced substance misuse
- Reductions in internalizing problems such as anxiety, dissociation, and post-traumatic stress disorder symptoms and reduced rates of mental illness
- long-term re-arrest rates reduced

## **5. Quality**

- The Council must be able to demonstrate that the above service objectives are being delivered and that outcomes are being achieved
- The Council will ensure that they have the right staff with the right skills, qualifications, experience and knowledge and that they will work in partnership with the Children and Young People's Trust to develop and deliver the model specified.
- The Council will manage risk in order to ensure that essential standards of quality and safety are maintained and have systems in place to assess and monitor the quality of service provision/strategy implementation.
- The Council will take account of comments and complaints, investigations into poor practice and have recognised protocols for dealing with any such incidents or complaints.
- The Council will identify, implement and demonstrate continuous improvements to the quality of the service.
- All staff that come into contact with children and young people shall have submitted checks to the Disclosure and Barring Scheme and be aware of their responsibility to safeguard and promote the welfare of children and young people. Staff providing services for children and their families as well as those with incidental contact with children should have appropriate ongoing training in order to fulfil their responsibilities for the child's welfare.
- Staff dealing with parents/carers who are accessing services and whom give concerns to professionals with regards to the health safety and well being of children in their care, will communicate their concerns effectively through the appropriate referral systems that are agreed and adopted locally through the Barnsley Safeguarding Children Board.
- The policy will include a clear protocol for the management of child protection concerns and possible breaches of confidentiality. All staff (both clinical and non-clinical) should be familiar with the service's confidentiality policy.

## **6. Expected Outcomes**

- That families are empowered to resolve and address issues at the earliest opportunity without the need for longer term statutory children's social care intervention demonstrated via a reduction in looked after children and evidence of what's improved for the child.
- A reduction in contact with the Police and Criminal Justice system
- An improvement in the level of attendance and attainment at school
- An increase in parents reported sense of self-efficacy
- Increased opportunities for families, children and young people to have their voice recognised by playing a central role in decision making processes.
- A successful transition route from specialist services to universal services or independent functioning without further intervention.

## **7. Service monitoring and evaluation**

The Council will demonstrate the effectiveness of the service in terms of delivering the expected outputs, and therefore contributing to the specified outcomes. Information systems must comply with the requirement of the Data Protection Act and BMBC Guidance on Information Governance. The Programme Manager will review performance and financial management on a quarterly basis.

## **8. Provision of service**

The Council has a legal obligation to adhere to all equality legislation. The Council shall hold all relevant policies at the commencement of delivery. These policies shall include the reporting

mechanism for any adverse events which would constitute a deviation. Any and all adverse events should be reported to the Programme Manager.

The Council shall act reasonably and in good faith and comply with requirements as stated.

- The Council shall carry out the services in line with best practice.

The Council will ensure that:

- The Programme Manager will directly manage all aspects of the Service following established protocols within the Council.
- The Council shall have the right people with the right skills in the right numbers to deliver safe, child centric and cost effective provision. That recruitment and management of staff is adherent to best practice in safeguarding children.
- The Council shall have in place effective appraisal and continuing professional development arrangements and be able to demonstrate continuous improvement in their workforce if required.
- The service will meet all stated outcomes.
- The services provided will operate in line with the Council's child protection and safeguarding standards and in accordance with the requirements of Barnsley Safeguarding Children Board.

For the avoidance of doubt, nothing in this Agreement is intended to prevent the Council from setting higher quality standards than those laid down in the Agreement.