Brief guide: substance misuse services – workforce qualifications

Context
Many substance misuse services employ multidisciplinary teams. Staff in these teams hold a range of qualifications and are required to work within their level of competency, supported by regular and effective clinical supervision. This means they should not offer treatments, advice, care and support which they have not been trained and/or are not competent to give. Multidisciplinary teams may include a range of professionally qualified workers (see appendix 1).

The type of staff directly employed by providers will vary in line with the type of service provided, for example, medically managed services, such as inpatient detox units, are likely to directly employ doctors, but medically monitored services, such as psychosocial residential settings, will almost always rely on a local GP or other visiting doctor.¹

Any member of staff prescribing medicines must be qualified to do so, for example a registered medical practitioner or a non-medical prescriber (NMP), such as a nurse or pharmacist who has undertaken additional training to qualify as a NMP.

Academic qualifications, such as a degree in psychology, are not enough on their own, even if they are in a related area. Staff members with academic qualifications or life experience, who do not hold a professional health or social care qualification, should also have, or be working towards, a practice-based qualification (see appendix 2).

Substance misuse services often employ paid or voluntary peer mentors.² Providers must make sure that these employees receive any training required, including an induction to the service, in order to carry out the role(s) assigned to them. Some peer-to-peer workers may be professionally qualified in addition to their life experience.

Evidence required
A good service should be able to demonstrate the following:

Where appropriate (for example, in services that offer detoxification), there is a competent and appropriately qualified/trained person to provide clinical leadership for the treatment provided. This person may be employed directly by the service provider or by a different provider.

When prescribers (doctors and/or NMPs) are employed, they are appropriately trained, supervised and supported.

Strong regular supervision and line management is in place for all staff members, backed up by appropriate policies and staff records.

All staff possess the relevant competencies for their role, for example, for administering medicines. Any employees who are professionally qualified are registered with their professional body.

Staff who are working towards a professional qualification follow a course of study recognised by an appropriate professional body and have their practice supervised in line with the requirements of that professional body.

¹ Medically managed means there is 24-hour, medically directed evaluation, care and treatment of substance misuse disorders on site; Medically monitored – enough medical supervision is provided by a visiting GP/other doctor, who is appropriately trained, with some knowledge of the management of addiction problems. See SCAN Consensus Project, Inpatient Treatment of Drug and Alcohol Misusers in the National Health Service, 2006.
² Peer mentor means someone who has been in a similar situation to the person/s they are supporting. It can be a paid or voluntary role and other role titles may be used.
Professionally qualified staff have attended training or similar on relevant substance misuse topics as part of their CPD. If new in post, there should be a plan in place to develop their skills and knowledge in this area if it is new to them.

Other staff involved in providing care and support have a practice based qualification, or are working towards one (appendix 2). This includes peer-to-peer workers and volunteers (if they provide care and/or support). Registered managers hold or are working towards a management qualification (appendix 2).

**Reporting**

In the **skilled staff to deliver care** section of **effective**, refer to the training and qualifications of the health and care staff employed and say how they are supported to acquire or maintain substance misuse specialist skills and knowledge. If responsibility for training and qualifications rests with another provider, record how this provider checks that this is monitored by the other provider. Refer also to arrangements in place for professionals to maintain their registration.

**Policy**

The Royal College of Psychiatrists’/Royal College of GPs’ report **CR173** contains specific guidance about the role and competencies of doctors employed by or contracted to substance misuse services. Three levels of competency are described: generalists, intermediate and specialist. Public Health England has published information on the [role of addiction specialist doctors](https://www.gov.uk/government/publications/role-of-addiction-specialist-doctors).


The Nursing and Midwifery Council provides guidance for employers of nurses about the [revalidation](https://www.nmc.org.uk/guidance-and-resources/revalidation) activities they need to complete to maintain their registration. The Royal College of Nursing publishes information about nurse non-medical prescriber (also known as nurse independent prescriber (NIP)) qualifications. There is also Public Health England information relevant to all types of non-medical prescriber in substance misuse services, and guidance on the role of addiction specialist nurses is due shortly.


The Federation of Drug and Alcohol Professionals (FDAP) makes recommendations about qualifications in its guidance 'Developing standards of practice in the drugs and alcohol workforce: It’s a vision thing' ([DANOS 2012](https://www.gov.uk/government/publications/developing-standards-of-practice-in-the-drugs-and-alcohol-workforce-its-a-vision-thing)). However, this document pre-dates the care certificate (see [appendix 1b](https://www.gov.uk/government/publications/care-certificate)) and some other changes to training and qualifications.

**Links to regulations**

Appendix 1: Substance misuse services – professional qualifications and registration

Qualifications alone do not guarantee competence, so providers should also have appropriate systems in place to ensure competence, such as regular clinical supervision, peer review, clinical audit etc.

Professionally qualified staff are people who are qualified to practise in the UK in a regulated health or social care profession (for example, a nurse, doctor, pharmacist or social worker). They must be registered with their relevant professional body.

Fully qualified psychiatrists who specialise in substance misuse should have a corresponding ‘endorsement’ on the General Medical Council’s specialist register.

GPs and pharmacists can be accredited as substance misuse practitioners with a special interest (PwSI). During the accreditation process, the PwSI is expected to provide evidence of acquisition and maintenance of appropriate competences in substance misuse. While this is not compulsory, it is considered good practice for GPs and pharmacists working in this field.

Another indicator of good practice for GPs is completion of specialist training such as Royal College of GPs Certificate in the Management of Drug Misuse (it is also open to other professionals). CQC expects to see some evidence of specialist training if GPs are prescribers for substance misuse services.

A professionally qualified staff member may sometimes be chartered by The British Psychological Society (BPS) as a psychologist, or certified as a counsellor or psychotherapist by a recognised certifying body. Anyone practising as a counsellor or psychotherapist who is not already certified by an appropriate body should be working towards this under appropriate supervision.

The Health and Care Professionals Council (HCPC) currently regulates arts therapists, occupational therapists, physiotherapists, practitioner psychologists, social workers and speech and language therapists. Its remit extends to other professional groups unlikely to be employed within substance misuse services.

All of the professions the HCPC regulate have at least one professional title that is protected by law. This means, for example, that anyone using the title ‘social worker’ in England must be registered with them. Professionals registered with the HCPC must meet their standards for training, professional skills, behaviour and be medically fit for work.

Certifying bodies include the British Association for Counselling & Psychotherapy (BACP), UK Council for Psychotherapy (UKCP) or the Federation of Drug & Alcohol Professionals (FDAP).
Appendix 2: Substance misuse services – practice-based qualifications

Qualifications alone do not guarantee competence, so providers should also have appropriate systems in place to ensure competence, such as management supervision, appraisal, audits etc.

Staff working in substance misuse services who are new to care and support or do not hold a professional qualification should undertake the Care Certificate (this has replaced the common induction standards) or an equivalent induction programme.

Information about the care certificate.

Once their induction has taken place, staff without professional qualifications should complete a practice-based qualification, for example:

The Diploma in Health and Social Care (Adults) England at level 2. This level 2 diploma does not include any specific substance misuse units, but equips people with generic skills and knowledge applicable to most health or care settings.

The Diploma in Health and Social Care (Adults) England at level 3 designed for those with more experience or senior/specialist roles. This level 3 diploma includes some relevant ‘optional competence units’ such as ‘Test for substance use’ and ‘Supply and exchange injecting equipment for individuals’.

Information about level 2 and level 3 qualifications.

Registered managers should hold or be working towards a suitable management qualification, such as the Diploma in Leadership in Health and Social Care and Children and Young People’s Services (Adults’ Management) at level 5. This level 5 diploma offers some particularly relevant ‘optional units’, such as ‘Identify and act upon immediate risk of danger to substance users’.

Information about level 5 qualifications.

Alternative qualifications are acceptable if the content is appropriate for the post held by the staff member, the training is practice-based and provided at an appropriate level.

Information about the Qualifications and Credit Framework (QCF).