

Space to breathe

As the last remaining rehab unit for young people faces closure, staff at Middlegate argue that residential care represents more than just value for money. DDN reports

A 12-week stay at Middlegate residential unit in Lincolnshire is not cheap. At £3,600 a week, a 12-week programme costs £43,200 so it is perhaps not surprising that commissioners are readily resorting to less expensive options to treat 12 to 17-year-old clients.

But to discount residential care is to be short sighted, argues Middlegate's chairman Chris Robertson. 'I'm the first person to admit that young people should be treated in the community,' he says. 'But there is a small proportion of people who we believe need residential treatment to get away from drug dealers – and to keep them out of secure units.' While there are some people that need to go through the prison service, he argues that there are many more that could benefit from being diverted through Middlegate's doors.

The NTA has just reported a 12 per cent rise in young people seeking treatment over the last two years, yet this last young people's residential centre has seen referrals dwindle to the point that they have had to warn staff of imminent redundancy. So why is Middlegate not benefiting from more of the £24.7m provided by the Department of Health for young people's treatment?

It's a question that the unit's manager Gordon Beattie is necessarily preoccupied with – particularly as he is often asked by workers where they can get the money from to refer young people to Middlegate ('I mean if the workers don't know, how crazy is that?'). He believes there should be a central pot of money to fund young people's units like his, all over the country.

Middlegate's staff-to-client ration is high – 30 full and part-time staff to just five client bed spaces (only two of which are currently occupied). But the same elements that make the unit expensive are what make it an intensive and effective experience for its clients, according to Beattie. 'The detox is the easy bit,' he says. 'We work on the psychological side and usually when young people come to us they're so damaged we have to do a lot of work behind the scenes on why they went onto drugs in the first place.'

There are nurses, a medical director (local GP), teacher, senior programme workers who are NVQ childcare trained as well as trained in drugs work, counsellors, therapists and social workers. Ten of these staff are full time and the rest work different shifts to cover the unit 24/7. All are trained to work on 'a massive range of issues' that could range from being unloved and unwanted, to being abused by their family. Some have been attacked and raped; others have gone into prostitution to pay for their drugs or are supplied drugs by pimps. Some, says Beattie, are like wild animals when they come in with a drug habit – 'we're teaching them to be human again, to respect others and to go out there and earn their money rather than steal it... they go on from here to college or into foster care or back home to be a proper human being. We feed them back into society.'

'It's quite an intense programme – it's not like a holiday camp, it's very structured,' he adds. From the first week, their timetable is filled with one-hour sessions – one-to-one and group work around their behaviour and anger management. 'It's like a drip, drip, drip – they gradually become more aware of why they went on drugs and the dangers of drugs... they go on to learn life skills as well – how to cook, clean and look after themselves.'

Results from this approach demonstrate why residential care works for such cases, according to Beattie. Cheaper options amount to papering over the cracks, he says. Middlegate is about creating a family environment where everyone joins in the same activities and eats together – 'we've had people here who have never sat up at a table and had a meal with anybody,' Beattie points out. Mentoring takes place through a buddy system and previous clients who have done well are invited back to do group work.

For young people who find themselves facing prison for drug-related offences, Beattie is passionate about Middlegate's relevance to offering a vital last chance: 'If a young person goes in front of the justice system and they have been committing crimes to get money for drugs, surely they should be put into rehabilitation and given one last chance to get off the drugs and prove themselves,' he argues. 'There should be that chance... if you put them in a secure unit, all they're going to do is go from one secure unit to another and then into mainstream prison.'

So, far from being unaffordable, a stay at Middlegate should be viewed as an investment in keeping people out of the criminal justice system, he says. Furthermore, he believes the programme goes beyond the datasets to transform lives, and that's why the staff at the unit are hanging on for a reprieve and still 'just as passionate about helping young people'. With an Ofsted 'outstanding' rating over the past two years, Beattie – who has himself worked at the unit since 1996 – does not want to see his staff disbanded and a wealth of experience lost.

He looks back over some memorable clients and recalls several for whom he believes Middlegate was a life-changer – among them a 16-year-old girl who 'didn't know any different and thought prostitution was the thing to do to earn her money to get her drugs.'

'For the first three weeks she was proudly telling everyone "I work for my money" – she honestly believed it was a proper job,' he says. 'We finally got through to her... with the help of our services we got her into college and she's now got a new life with a flat of her own. She's doing really well.'

Other cases – and he thinks back in particular to cases of young people with alcohol – demonstrate the value of having a retreat away from the community. 'It starts off like a "jolly" with other lads – then it becomes a problem and they find they are drinking seriously. Alcohol is available from every shop on every street corner and you are not going to be able to stop unless you get away from that scene because it's in

your face all the time.'

He recalls one young lad telling him: 'I used to wake up in the morning after being really drunk the night before and having money in my pockets. I didn't know where the money had come from, and that frightened me – am I threatening people? Am I stealing the money? Or am I accepting money for something else?'

This new client had desperately tried to stop drinking before coming to Middlegate, says Beattie – 'but he was in an area where this was the normal thing that everybody did. So he needed to come somewhere like this and make that break, just to get away from it. If this wasn't here, where would he go?'

At the end of last month, Beattie sent out a letter to members of parliament, and anyone else he could think of that may have influence, to make exactly that point – that residential services for young people were effective and needed, but that once the unit had been abandoned to its impending closure, it would be too late to decide it should have been saved.

'In this time of social services failures it is hard to accept that a successful unit like ours is going to close. Ceasing this unique service will leave the young people of this country alone and vulnerable,' he said in the letter, and attached a copy of the formal notification of short-time working, lay-off and possible redundancies that the managing director had sent to Middlegate staff – himself included – to underline the gravity of the situation.

So far there has been friendly support from colleagues within the field, as well as public statements that residential units are an important option for young people's treatment. But there has been no direct practical response to the crisis and chair Chris Robertson perceives ministers and the NTA to be at best ambivalent and at worst indifferent to Middlegate's plight, citing commissioners' obligations to look at young people's complex needs and hinting that community services may be better placed to do this.

Whatever happens – and Middlegate are still hoping for a miracle turnaround in fortunes – the staff at the unit will fight on to make sure nobody is thrown out midway through treatment. Despite all the uncertainty about what will happen to the unit, young clients will still be fully consulted about their own future and involved in decisions about them.

'For the first time they think "hang on, somebody's actually listening to me." That's worth a pot of gold when you see their face,' says Gordon Beattie – who must be wishing Middlegate's future was in similar safe hands. **DDN**

What do you think?

Should the last young people's residential unit be allowed to close? Do we need this option alongside community treatment? Please email your views to claire@cjwellings.com for our letters page, or join the debate at the DDN forum at www.drinkanddrugsnews.com