

This form is a screening tool to indicate whether an assessment by a specialist service is needed. The specialist service will use this information to determine an appropriate course of action. This may result in the young person being offered some form of intervention/treatment or in further advice and guidance being offered to the referrer. All information on completed DUST forms will be treated in accordance with the service's confidentiality policies – a copy of which is available on request.

## Instructions

- Complete the form by ticking the most appropriate responses. If in doubt, do **NOT** tick.
- A scoring system is employed for each section. The scores should be added up and the total written below each section.  
**Please do not include past use in your scores.**
- Once you have completed each section, refer to the scoring table (top right).  
If the young person does not meet the threshold for referral but you still have concerns, please contact Barod's N-gage service for advice and information.

## Where to access confidential advice, consultancy and further information



**0333 3202751**

GwentN-Gage@drugaidcymru.com  
Gwent Substance Misuse  
Children and Young People Service  
For out of hours DAN 247 0800 633 5588

## SCORING TABLE

### SECTION 1: Drug/alcohol use

Score 0-4	Score 5-6	Score 7+
Consider giving drugs information/ advice.	Consider seeking advice from Drugaid.	Refer to Drugaid.

However please be aware that we cannot accept personal details without the young person's consent.

### SECTION 2: Social situation/behaviour

A high score means that a young person is vulnerable to developing drug/alcohol misuse problems and should increase your level of concern.

Score 0-1	Score 2-5	Score 6+
LOW RISK	MEDIUM RISK Consider seeking advice from Drugaid.	HIGH RISK Consider seeking advice from Drugaid or other relevant agency.

### SECTION 3: General and Psychological health

A high score means that a young person is vulnerable to developing drug/alcohol misuse problems and should increase your level of concern.

Score 0-4	Score 5-9	Score 10+
LOW RISK	MEDIUM RISK Consider seeking advice from Drugaid.	HIGH RISK Consider seeking advice from Drugaid or other relevant agency.

PAST USE		USE IN LAST 3 MONTHS		SECTION 1 Drug/alcohol use
				<b>Drug Type</b>
		2		Alcohol
		2		Amphetamine
		2		Cannabis
		4		Cocaine
		7		Crack
		4		Ecstasy
		7		Heroin
		4		Ketamine
		4		LSD
		4		Magic Mushrooms
		7		Solvents / Gas/ Aerosols
		2		Other(s) please list (include misuse of prescribed drugs). Score 2 each
				<b>Drug/Alcohol Use - Frequency</b>
		1		Occasional drug / alcohol use
		2		Regular drug / alcohol use
				<b>Injecting</b>
		0		Not injecting
		5		Currently/recently injecting
				<b>Drug/Alcohol Use - Intoxication</b>
		0		Drug/alcohol use without loss of consciousness or aggression
		2		Drug/alcohol use with loss of consciousness or aggression
				<b>Contact with Other Drug/Alcohol Users</b>
		0		No drug/alcohol using friends
		1		Some friends who use drugs/alcohol and some who don't
		2		All friends use drugs/alcohol

TOTAL SECTION 1:



		SECTION 2 Social situation/behaviour
		<b>Living Situation</b>
	0	No problems with accommodation
	1	Problems with accommodation, insecure or inadequate housing
	2	Looked after by Local Authority
	6	Homeless
		<b>Adult Support</b>
	0	Has supportive relationships with more than one adult
	1	Has supportive relationship with one adult
	2	Has no supportive relationships with adults
	2	Problematic relationships (e.g. domestic violence at home)
		<b>Occupation</b>
	0	In education / employment / training
	1	Truanting from school / at risk of school exclusion / drug or alcohol related absences from work
	2	School excluded / unemployed
		<b>Criminal Involvement</b>
	0	No criminal involvement
	1	At risk of involvement in the Criminal Justice System
	2	Involved in Criminal Justice System or committing more serious crimes
		<b>Sexual Behaviour</b>
	0	Age appropriate / safe sexual behaviour
	2	Inappropriate / unsafe sexual behaviour
	6	Commercial sex / abusive sexual relations
		<b>Other</b>
	2	Drug related debt
		<b>Family Drug/Alcohol Use</b>
	0	No known family drug / alcohol misuse
	2	Known drug / alcohol misuse among close family member(s) / carers
	5	Significantly affected by someone else's drug / alcohol misuse

TOTAL SECTION 2:

		SECTION 3 General and Psychological health
		<b>General Health</b>
	0	Young person reports no significant health problems
	1	Teeth problems
	1	Stomach problems
	1	Regular headaches
	1	Difficulty sleeping
	5	Chronic fatigue
	5	Severe sleep problems
	5	Self-neglect
	10	Extreme weight loss
	10	Blackouts and / or memory loss
	10	Pregnant
	10	Fitting
	10	Occupation/Accidental / planned overdose
		<b>Psychological Health</b>
	0	Young person reports no significant psychological problems
	1	Low self esteem
	1	Mild anxiety
	1	Shyness
	5	Eating disorder/ marked change in eating pattern (e.g. loss of appetite / bingeing)
	5	Frequent bouts of unhappiness / depression
	5	Self-harm
	5	Severe anxiety / panic attacks
	10	Suicide attempts
	10	Severe paranoia
	10	Hallucinations (when not under the influence of drugs/alcohol)
		<b>TOTAL SECTION 3:</b>

This tool is for guidance. It is intended to assist with decision making about how to respond to drug/alcohol use by a young person. It does not remove the need for professional judgement which should take account of factors such as the age and maturity of the young person.