# DRUG AND ALCOHOL DELIVERY BULLETIN

January 2014

Welcome to the January 2014 issue of the Drug and Alcohol Delivery Bulletin. Updates on recent developments and plans include:

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- Know the Score: new look website
- Scottish Government Alcohol Industry Partnership and Alcohol and Drug Partnerships



#### **QUERIES ON THE CONTENT OF THIS BULLETIN:**

If you have any queries on the content of this bulletin, please contact alcoholanddrugdelivery@scotland.gsi.gov.uk

#### Drug & Alcohol Treatment Waiting Times HEAT Standard

The latest quarterly drug and alcohol treatment waiting times figures were published on 17<sup>th</sup> December 2013 and can be accessed on the ISD website: <u>http://www.isdscotland.org/Health-Topics/Drugs-and-Alcohol-Misuse/Publications/</u>.

This publication of data informs the HEAT Standard for drug and alcohol treatment waiting times which expects that 90% of people receive appropriate treatment within 3 weeks to support their recovery and includes data on waiting times within prisons.

### We are delighted to note that national performance continues to improve:

- In July September 2013, 96.6% of the 12,064 people who started their first drug or alcohol treatment had waited 3 weeks or less, compared to 96% in the previous quarter. For alcohol, 97.1% of people waited less than 3 weeks while for drugs the figure was 95.7%.
- 97.1% of the 7,955 people who started alcohol treatment between July and September 2013 had waited 3 weeks or less, compared to 96.2% in the previous quarter.
- 95.7% of the 4,109 people who attended an appointment for drug treatment waited 3 weeks or less, compared to 95.6% in the previous quarter.

 Of the 2,907 people who were still waiting to start drug or alcohol treatment at the end of September 2013, 3.5% (101 people) had waited more than 6 weeks. This is a slight increase from the previous quarter where 2.6% (82 people) had waited more than 6 weeks. We are working with ADPs and services to address this.

## We are also heartened by the performance of prisons in relation to this HEAT Standard:

 In July - September 2013, of the 1,584 people who started their first drug or alcohol treatment in Scottish prisons, 98.4% had waited 3 weeks or less and 88.6% had waited one week or less (based on returns from 12 of the 16 prisons).

We expect that all prisons fully comply with this HEAT Standard. We will be working with areas to ensure that prisons compliance and data quality continues to improve and that any long waits are addressed.

Please contact Hilary Smith, HEAT Standard Lead, should you wish to discuss this in more detail: <u>Hilary.smith@scotland.gsi.gov.uk</u>

Alcohol Brief Interventions (ABI) HEAT Standard 2014-15

The ABI HEAT standard will continue for 2014-15. It is anticipated that 2014-15 will be the final year of the HEAT standard. NHS Boards and ADPs



## should use this year to fully embed ABI delivery into routine practice.

NHS Boards and their ADP partners should maintain the same total level of delivery of ABIs as in 2013-14 (i.e. 61,081 ABIs nationally). It is expected that at least 90% of delivery (i.e. a minimum of 54,973 ABIs) will continue to be in the priority settings (Primary Antenatal and A&E). Care. The remainder can be delivered in wider settings in accordance with the ABI HEAT standard national guidance for 2014-15, which was issued to ABI and ADP Coordinators Leads in December and will be published on the Scotland NHS Health website. Information has also been requested about planning for local delivery of ABIs.

The of ABI long-term aim the programme has always been to sustain and embed ABI delivery into the day-today practice of NHSScotland. The emphasis for 2014-15 will be on identifying outstanding issues in ABI delivery and working with NHS Boards and ADPs to share best practice to find local. sustainable solutions for embedding and broadening delivery settings.

For further information please contact Kirsty Macdonald, ABI Programme Manager, Scottish Government <u>Kirsty.Macdonald@scotland.gsi.gov.uk</u> or on 0131 244 3198. Borders Alcohol & Drug Partnership (ADP) Demand, Capacity, Activity & Queue (DCAQ) – Case Study

Borders ADP was given permission to use the QuEST DCAQ tool as part of an Investment Review regarding investment of funding for Interventions and Services. The tool provided a validated method of collecting service related data.

Before implementing the tool there were several areas to be agreed with service managers, such as the definition of an allocation meeting and confirming the most appropriate data collection period.

Use of the tool highlighted some variations in service provision e.g. length of appointment and also some areas for improvement such as lost capacity due to DNA's (Did not Attends).

The timing of use of the tool just before a procurement exercise means that learning was challenging to build into existing services. However, the exercise has given useful insight into demand and capacity of our system and has informed contracting for new services starting in May 2014.

The full case study report is available at: <u>http://www.ssks.org.uk/topics/drugs-</u> <u>and-alcohol/developing-recovery-</u> <u>orientated-systems-of-care-driver-</u> <u>diagram.aspx#examples</u> For more information please contact Fiona Doig, Borders ADP Coordinator: fiona.doig@borders.scot.nhs.uk



#### Dumfries and Galloway Alcohol & Drug Partnership (ADP) Outcomes Star

The Alcohol Star was introduced to drug and alcohol treatment providers in Dumfries and Galloway to provide a means of producing outcomes for service users as well as services.

The Alcohol Star is a tool from a suite of Outcomes Star tools that enables organisations to measure and summarise progress of their clients' lifestyles on a scale of 1 - 10, with 10 being the best. There are 10 categories that are measured on the Alcohol Star. some other Stars such as "The Family Star" and "My Star" have fewer categories. The Stars provide a visual way of plotting a client's progress and allows them to see where they are doing well and areas where they are not. All ADP funded services in Dumfries and Galloway are reauired to collect outcomes data. using the most appropriate Star for their service users.

Data is recorded on a web based system, which provides reports for individual clients, services and organisations. All staff are trained to use the system, with licences funded by the ADP. Reports can be produced at client level, service level and organisation level.

ADP produces reports on a six monthly basis to show the outcomes for all the services and how they are linked to The Service Delivery Outcomes within Delivering Better Outcomes: An Outcomes Toolkit for Alcohol and Drugs Partnerships V1 (2009).

By using the Outcome Stars, Dumfries and Galloway ADP funded services are able to demonstrate that their clients are progressing in their recovery, in line with the indicators and measures set by the Scottish Government and the local ADP strategy.

For further information contact Jackie Davies, Research and Information Officer: jdavies1888@nhs.net or on 01387 244023

#### Dundee Alcohol & Drug Partnership (ADP) Alcohol & Drugs Review

Dundee ADP is currently undergoing a comprehensive review of all alcohol and drugs issues in the city. This is based commitment increase on а to effectiveness, reduce duplication, deliver recovery-based services and increase focus on prevention interventions.

As part of this review, an Improvement Event took place during the first week of December 2013 to enhance the delivery of recovery-focused service in Dundee.

Improvement Events provide an exciting opportunity to carry out a facilitated problem-solving review. The strength of Improvement Events is that they are based on the whole-system and invite all stakeholders to work together. The mandate from Chief Officers ensures Improvement Event teams are



empowered to act and implement changes. The key output of Improvement Events is to develop a plan for change, including specific actions that can be tested almost immediately.

Following the Improvement Event in Dundee, a change-plan containing three connected elements was developed:

1. Community 'Hubs' for engagement and service delivery: These hubs will provide services to all members of the community. They will include drop-in facilities and access to a range of specialist and generic services. They will involve joint-working, co-location and an input from volunteers, mutual aid and peer support groups.

2. Support & Connect Workers (S&CW): Each individual accessing alcohol or drugs services will be allocated an S&CW. The role of the S&CW will be to develop a recovery care plan with the individual and to support progress by meeting their recovery goals.

**3. Common Assessment Framework:** The Drug & Alcohol Outcomes Star will be used by all professionals to develop and monitor recovery care plans.

All three elements of the plan are currently being tested and will be implemented during 2014.

For more information please contact Vered Hopkins, Dundee ADP Development Officer: vered.hopkins@nhs.net Lanarkshire Alcohol & Drug Partnership (ADP) Promoting Well-being for Children and Young People Living with Substance Misuse

In January 2013, Lanarkshire ADP commissioned Mairi Tulbure Associates to develop resources for practitioners working within adult substance misuse services in order to support an understanding of the Scottish Governments expectations under the combined frameworks of Getting it Right for Every Child (GIRFEC) and Getting our Priorities Right (GOPR) and also the new Children and Young People's Bill currently making its way through parliament.

The resources, which were developed in conjunction with a focus group of local practitioners, include:

- Practice Guidance documentation for staff including the *Promoting Well-Being Assessment;*
- a flowchart detailing the new expectations of practitioners;
- a set of 7 exemplars;
- 5 prompt cards and;
- an office wall poster

These resources and the staff training/briefings that accompany them will support substance misuse service staff with their role in promoting, developing and safeguarding children's well-being. This work will also support children's services staff in the



implementation of GIRFEC, particularly those who will take on the roles of the Named Person and Lead Professional, enabling better joint working and a fuller understanding of children and families' lives.

Additionally, there is a Training for Trainers element to this work to ensure sustained capacity building is in place across the substance misuse workforce over time with the members of the focus group, mentioned above, taking on this role.

The majority of local substance misuse service staff have now participated in the appropriate training/briefings and focus the current is on the implementation of the new process and paperwork, including the most effective way to brief those staff groups that will receive the information gathered by adult addiction services through the Promoting Wellbeing Assessment, predominantly those staff groups who have the role of the Named Person.

For further information please contact: Rosie Kerr: <u>KerrRosie@northlan.gov.uk</u> or Eleanor McDermott: <u>Eleanor.McDermott@lanarkshire.scot.n</u> <u>hs.uk</u>

Outer Hebrides Alcohol & Drug Partnership (ADP) Outcomes Reporting

Following the recommendation made within 'The Quality Alcohol Treatment

and Support (QATS)' Report in 2011, the Outer Hebrides ADP committed to become more outcomes focused in order to demonstrate the effectiveness and efficiency of local funded services. It was therefore decided to revise the

reauired 6 monthly and annual monitoring forms into a Monitoring Form and a separate Outcomes Database which were designed to capture both quantitative and qualitative data. The Hebrides ADP looked Outer at 'Delivering better outcomes: An Outcomes Toolkit for Alcohol and Drug Partnerships (2009)' for guidance on appropriate outcomes and indicator recording/reporting.

The Outcomes Database and Monitoring form were designed to provide with comprehensive us information and to gather baseline information from which we could measure the effectiveness of funded services and build up a picture of who is accessing services, what the local trends are and what support they require. This information allows us to effectively evaluate services and also measure funded services against national and local outcomes.

Since this was implemented in 2011 the degrees of completion and quality of data provided has varied across all the services with some services not collecting the information routinely required in the Outcomes Database. The Outer Hebrides ADP is endeavouring to address this issue to ensure that data recording is consistent across all services while at the same time ensuring that the reporting process



is straightforward for all services. Additionally, the Outer Hebrides ADP are looking to develop local targets for services to meet, this will be done at the end of 2013/14, which is the first full year of reporting from the Outcomes Database.

Looking ahead to the future funding period, we hope that the monitoring and evaluation information gathered, along with the community consultations and needs assessment information, will assist us to plan and develop services based on the needs of the various communities throughout the Outer Hebrides.

For more information please contact Fiona Hall, Substance Misuse Information & Research Officer: <u>fionahall1@nhs.net</u>

#### 2012-13 Alcohol and Drug Partnership (ADP) Reports

We would like to thank all ADPs for sharing their 2012-13 Annual Reports. This has provided an insight into the work and activities undertaken by ADPs across the country as well as supporting a national picture of delivery for Scottish Ministers. These findings have also been shared with the ADP Planning and Reporting Group, which is chaired by Kenny Leinster, South Ayrshire ADP Chair.

The Scottish Government have provided light touch individual feedback to ADPs on their reports this year. The ADP Planning and Reporting Group will work with Scottish Government to support ADPs where appropriate in strengthening the following areas:

- the culture and value of accurate self-assessment.
- the value of providing more detailed information on accountability routes, which should ideally include details on the ADPs working relationship with the CPP.
- the need for a clearer performance framework – which should include clear SMART targets for both national and local indicators, explicit commentary on inputs which link to activities, greater use of baseline data, and benchmarking in comparison to similar ADP areas (the ISD ScotPHO profiling tool launched in September should help with this).
- the continued importance of child protection – ensuring and evidencing that formal arrangements are in place between ADPs, Services and Child Protection Committees.

Please contact Amanda Adams, Scottish Government, Alcohol Team, if you wish to discuss this in more detail: <u>Amanda.adams@scotland.gsi.gov.uk</u>

#### GIRFEC Implementation: Research Project

NHS Education for Scotland and NHS Health Scotland have been asked to undertake a collaborative project to



explore the current implementation of Getting it Right for Every Child (GIRFEC) in Scotland: <u>http://www.scotland.gov.uk/Topics/Peop</u> <u>le/Young-People/gettingitright</u>.

GIRFEC is the approach that underpins all early years work in Scotland. It calls for all workers who come into contact with children and/or their families e.g. Health, Education, Social Work, Police, Housing, community and voluntary Groups etc. to work towards supporting children and young people grow, develop and reach their full potential.

GIRFEC encourages child centred practice through supporting effective partnership working to give children and young people the best start and improve their life opportunities. Building on the universal services of health and education it sets out to ensure services promote, support and protect the wellbeing of children and young people.

A mapping exercise conducted by NHS Health Scotland and NHS Education Scotland suggested gaps in the implementation of GIRFEC at a local level in services working with adults with additional needs who have children, and in acute services.

In order to ensure the implementation of GIRFEC will meet the needs of all of Scotland's children and young people, NHS Health Scotland and NHS Education Scotland would like to speak to you, as a professional working with adults with additional needs, to explore your awareness of GIRFEC and if you have been engaged in any local implementation of GIRFEC. The results from this research will inform the development of GIRFEC implementation guidance for the NHS.

If you would be interested in taking part in this research please contact Laura Martin: <u>laura.martin3@nhs.net</u> by Friday 28th February.

#### Scottish Recovery Consortium The Next Chapter

The Scottish Recovery Consortium (SRC) has released a new report called The Next Chapter which focuses upon the learning generated from last year's national Recovery Summit and what this could mean for the future of Scotland's recovery from drug and alcohol addiction.

Kuladharini, SRC Director said:

"Five years have passed since the launch of Scotland's national drugs strategy, The Road to Recovery, which brought a new approach to tackling drug and alcohol addiction in Scotland. We wanted to learn more about the recovery journey that the country had undertaken since 2008 and what possibilities the next five years could hold for recovery in Scotland.

We asked people to reflect on their experience of recovery in Scotland over the past five years and 135 people responded. Their collective thoughts are held in The Story So Far, a report that was created specifically to inform discussion at Scotland's second national Recovery Summit which was held in October 2013.



The SRC hosted this gathering, Scotland's second national recovery summit, where over 300 people drawn from all aspects of the recovery community came together to acknowledge the achievements of the past 5 years and share dreams and expectations for the future.

'The Next Chapter' has been created to collate the insight that we have gained from all those who came together at the Recovery Summit to contribute to our shared vision of the future of recovery in Scotland. It is intended as a companion piece to The Story so Far and to be read as a summary of all those involved in the recovery community's shared vision of the future."

The Next Chapter is a companion report to the Story So Far which was released in 2013. Both reports can be downloaded from the SRC website: <u>www.scottishrecoveryconsortium.org</u>

Becoming Trauma Informed: a Core Value in Services for Women 24-25 March 2014

The Scottish Prison Service and Families Outside, in collaboration with the Women@Risk Coalition, are holding a special event aimed at professionals who can lead and roll out trauma-informed principles and practice within their organisations.

This exclusive two-day course will be facilitated by Dr Stephanie Covington, a leading international expert recognised for her pioneering work in the area of clinician, author. trauma. Α organisational consultant, and lecturer, she specialises in the development and implementation of gender-responsive services and cultural change in both the public and private sectors. While the focus is on women, this course will have direct relevance to support for men and young people who have experienced trauma and can readily be rolled out across sectors.

Crucially, the training from the workshop equips front-line staff to recognise and manage trauma within their day-to-day work. The target audience includes senior decision-makers and professionals government across departments; the criminal justice, youth justice, and children's hearings systems; and associated voluntary and statutory services. Internal follow-up planning sessions to ensure roll-out will be an important outcome from the event.

This event forms part of a unique programme of workshops across the UK that shines the spotlight on women at risk within the criminal justice and associated health & social care systems. It presents solutions for transformative change to address the negative impact of trauma on health, mental health, and the development of adverse outcomes such as offending.



If you would like more information or an application form please email: <u>Michelle.Martin@familiesoutside.org.uk</u>

Scottish Drugs Forum Trauma and recovery amongst people who have injected within the past five

The Scottish Drugs Forum (SDF) in conjunction with Professor Richard Hammersley, Department of Psychology, University of Hull and Dr Phil Dalgarno, Glasgow Caledonian University have published research aimed to enhance the development and delivery of person-centred recovery oriented policy responses to problematic drug use through identifying potentially influential factors in the development of, and recovery from, harmful drug use via the exploration of life histories of a sample of problematic drug users. The research was funded by the Big Lottery Fund.

Fifty-five people who had injected heroin and other drugs within the previous five years, who were in recovery, told their stories to SDF peer research volunteers using Dan McAdams' Life Story Method.

• Drug injecting was principally a dysfunctional coping response to serious traumas or life difficulties as an adult and/or child, serving to obliterate distressing thoughts and worries related to these issues.

• Trauma often had not been recognized at the time, by professionals, or by the people involved, who had taken it as a fact of life.

• Problem drug use brings further trauma, including violence, overdose, bereavements and serious health problems, oscalating use further

problems, escalating use further.

• Severe childhood trauma was common; almost half remembered sexual or physical abuse.

• Over a third of participants mentioned growing up with at least one parent with an alcohol or drug problem, often with associated domestic violence, sometimes with sexual abuse of the child.

• Participants' stories illustrate the serious consequences of failing to intervene when young people have

problems (although some stories suggested intervention would have been challenging).

• Most participants came from or ended up in relatively deprived and stigmatised neighbourhoods – and were stigmatised within their own community for being drug users.

• During some periods of some stories, heavy substance use had been the least negative aspect of the person's life; usually before they became dependent on heroin.

• Participants described recovery as being able face up to the horrors experienced without the need to block and deaden thoughts and feelings with heroin and other drugs.

• Failure to identify and manage trauma and alcohol abuse appropriately contribute to the high prevalence of problem drug use in Scotland.



#### **Conclusions**

• Progression to heroin use and injecting is a sign that an individual is 'troubled' and unable to cope with their life experiences appropriately.

• High quality and effective psychological therapies need to be more widely and easily available.

• Drug services need to be more trauma-minded, focusing more on underlying traumas and life difficulties.

• Trauma and related services should be reviewed to ensure they have sufficient reach to intervene as early as possible in troubled lives.

• Identification of trauma impact in children and troubled young people using drugs and other substances is key.

The full report is available at: <u>http://www.sdf.org.uk/index.php/downlo</u> ad\_file/view/596/167/

For more information, contact Sean McCollum, Head of Operations, Scottish Drugs Forum: <u>sean@sdf.org.uk</u> or on 0141 221 1175

Alcohol Focus Scotland Unrecognised and under-reported: the impact of alcohol on people other than the drinker in Scotland.

1 in 2 Scots negatively affected by someone else's drinking

Research from Alcohol Focus Scotland, examines how alcohol harms people around the drinker causing stress, distress and disharmony to family members, friends, colleagues and the wider community.

The findings from the study suggest that harm caused by alcohol to people other than the drinker is wide ranging. Harm occurs in a number of ways – from neighbour disputes, workplace accidents and being harassed in the street to child neglect, family breakdown and violence. The harm also occurs in many different places, including within town centres, in the home, in neighbourhoods and in the workplace.

One in two people report being harmed as a result of someone else's drinking, with younger people under 35 and those who have heavy drinkers in their lives most affected.

The full report is available at <u>www.alcohol-focus-scotland.org.uk</u>

For more information please contact Jennifer Curran, Programme Lead, Alcohol Focus Scotland: Jennifer.curran@alcohol-focusscotland.org.uk

> Know the Score New look website

A new look Know the Score website was launched in December 2013. Know the Score is the Scottish Government's drugs information and advice service, accessible through a free, confidential helpline and website.



The web site design has been completely refreshed, making it now easier to navigate around. The site is also now mobile friendly. The web address remains the same: <u>www.knowthescore.info</u>

Please take some time to visit the site and if you have any questions, please let us know at:

alcoholanddrugdelivery@scotland.gsi.g ov.uk

Scottish Government Alcohol Industry Partnership and Alcohol and Drug Partnerships

A joint event between the Scottish Government Alcohol Industry Partnership (SGAIP) and Alcohol and Drug Partnerships (ADPs) was held at Murrayfield Stadium on 27 November 2013. This was at the suggestion of Michael Matheson, Minister for Public Health in order to improve understanding between the two groups and was the first time that they have met in this format.

The event was attended by a range of representatives from the SGAIP and ADPs and included presentations on their work as well as roundtable discussions. This was an open and productive session with key themes emerging around the value of pragmatic, local action. building relationships and using respective networks to help progress initiatives and shared goals around reducing alcohol misuse.

A letter following up on the event will be shared with all SGAIP members and ADPs and will be published on the SGAIP website at:

http://www.scotland.gov.uk/Topics/Healt h/Services/Alcohol/Partnership

For further information please contact the SGAIP joint secretariat:

Fern Morris, Alcohol Policy Team, Scottish Government Fern.Morris@scotland.gsi.gov.uk or 0131 244 5634

Douglas Meikle, Scotch Whisky Association <u>dmeikle@swa.org.uk</u> or 0131 222 9220

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