
Report To: Inverclyde Integration Joint Board **Date:** 17 March 2020

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Inverclyde Health & Social Care
Partnership **Report No:** IJB/18/2020/AH

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Subject: **ADRS CORRA PROJECT - NEW PATHWAYS FOR SERVICE
USERS**

1.0 PURPOSE

- 1.1 The purpose of this report is to update the Inverclyde Integration Joint Board on the progress to date with the Inverclyde Alcohol and Drug Partnership's successful bid to the Scottish Government's CORRA Challenge Fund to support activities which tackle problem alcohol and drug use in Scotland.

2.0 SUMMARY

- 2.1 The New Pathways for Service users programme has received £300,000 funding over two years from the CORRA Foundation and the Inverclyde IJB Transformation Fund. The programme commenced in October 2019.

The New Pathways for Service users programme aims to test change in three main areas:

- Improving engagement with hard to engage, hard to reach and hidden population by providing new routes to access services from Community outreach provision at GP practices and access to services across extended hours.
 - Preventing alcohol and drug-related admissions to acute services and presentations at emergency departments supporting a more appropriate response to people in crisis.
 - Providing a community-based treatment option for supported Home alcohol detoxification.
- 2.2 The project is underway with progress in a number of key areas including successful recruitment of workforce and a detailed first year project plan report in conjunction with the CORRA Foundation.
- 2.3 The project is integral to the ongoing redesign of the current Inverclyde Alcohol and Drug Service (ADRS) and will help test new ways of working and development for future service delivery.

3.0 RECOMMENDATIONS

- 3.1 That the Integration Joint Board notes the progress and actions being taken with the

CORRA funded New Pathways for Service Users Project.

Louise Long
Chief Officer, Corporate Director

4.0 BACKGROUND

- 4.1 The Scottish Government's Programme for Government (PfG)2018/19 - Additional Investment 2018/19 - included funding to support activities which tackle problem alcohol and drug use with a focus on seeking and supporting new innovative approaches, as well as responding to the needs of patients in a more joined-up person-centred way. Part of the Government's (PfG) additional funding was to be distributed through a Challenge Fund bidding process managed by the CORRA Foundation.
- 4.2 Inverclyde Alcohol and Drug Partnership (ADP) made a bid to the CORRA Foundation for Challenge funding for the "New Pathways for Services Users" project. The ADP bid was successful and a grant of £141,200 was awarded over two years. The project bid was match-funded from a successful bid to Inverclyde Integration Joint Board's Transformation Board. £150,000 was secured from this source to be allocated over two years with £75,000 per annum.

The "New Pathways for Services Users" project is to provide a focus on tests of change in three main areas:

- Improving engagement with hard to engage, hard to reach and hidden population by providing new routes to access services from community outreach provision at GP practices and access to services across extended hours.
 - Preventing alcohol and drug related admissions to acute services and presentations at emergency departments supporting a more appropriate response to people in crisis.
 - Providing a community based treatment option for home detox.
- 4.3 The project is intended to develop new provision to develop an enhanced clinical and extended access model to move our service towards a more responsive comprehensive model of treatment and support, promoting a recovery focused ethos.

5.0 PROGRESS TO DATE

- 5.1 The CORRA steering group has been established to oversee the programme roll-out; whilst this is a separate project, the test of change will be integral to the ongoing redesign of the HSCP Alcohol and Drug Recovery Service.
- 5.2 Meetings with colleagues from the CORRA Foundation have been ongoing to develop the project plan with key activities and outcomes. The project commenced in October 2019 and is now underway with the project lead in place and a range of activities as detailed in the project plan.
- 5.3 The programme/funding commenced in October 2019 and the 6 month project plan until April 2020 has been agreed as set out in Appendix 1, with progress against the plan as follows:
- The CORRA Project Lead is now in post and currently working through the first 6 months project plan, interfacing with internal and external agencies promoting the provision of the project aims.
 - Business support has now commenced and Band 6 nursing staff have been appointed, following a delay in HR processes. Currently awaiting start date within the next few weeks, following required recruitment processes being completed.
 - New Pathways into Service, and combined assessment paperwork to provide holistic, recovery orientated assessment for both alcohol and drug use are now in place and will be utilised within the new pathways for service users Outreach service.

- A standard operational procedure for alcohol and drug repeat attenders has been developed and implemented. The database is monitored and reviewed fortnightly in order for repeat presentations to be highlighted to allocated workers and added to the complex case meeting agenda for discussion and review.
- Inverclyde ED has agreed for weekly training to be recommenced by the Alcohol and Drug Liaison Service offering various training topics and to promote referral pathways.
- Consultant lead at Inverclyde ED will promote project with acute colleagues through monthly Core brief and highlight repeat presentations database regarding specific ICD coding.
- Staff and patient questionnaires have been developed and awaiting distribution, Questionnaires have focused on obtaining views regarding weekend and evening support including service users' views and opinions of treatment and/or support required during these times.
- Arrangements have been made to attend the GP Forum to present project aims and proposal in order to progress to allocate a surgery to implement outreach service and test change.
- Patient focus group has been established with current service users attending the education programme at ADRS and the peer support group at Your Voice to obtain views and opinions on crisis intervention strategies.
- An ADRS service report has been requested through the data analyst team to obtain a referral breakdown from local GP practices and outcomes of referrals.
- Standard operational procedures are in the process of development for the Primary care Outreach Service including a treatment and assessment pathway, supported home detox consent form and service users questionnaire post treatment. All documentation will be discussed with General Practitioners prior to implementation.

6.0 IMPLICATIONS

FINANCE

6.1

Cost Centre	Budget Heading	Budget Years	Proposed Spend this Report £000	Virement From	Other Comments
N/A					

Annually Recurring Costs / (Savings)

Cost Centre	Budget Heading	With Effect from	Annual Net Impact £000	Virement From	Other Comments
N/A					

LEGAL

6.2 There are no specific legal implications arising from this report.

HUMAN RESOURCES

6.3 There are no specific human resources implications arising from this report.

EQUALITIES

6.4 Has an Equality Impact Assessment been carried out?

	YES
x	NO – This report does not introduce a new policy, function or strategy or recommend a change to an existing policy, function or strategy. Therefore, no Equality Impact Assessment is required.

6.4.1 How does this report address our Equality Outcomes?

Equalities Outcome	Implications
People, including individuals from the above protected characteristic groups, can access HSCP services.	Positive impact – The new service project will ensure access and new pathways to services for all individuals
Discrimination faced by people covered by the protected characteristics across HSCP services is reduced if not eliminated.	Positive impact- The new service project will ensure service users with alcohol and drug issues are not discriminated against
People with protected characteristics feel safe within their communities.	Positive impact- The new service project will offer outreach support
HSCP staff understand that the needs of people with different protected characteristic and promote diversity in the work that they do.	Positive impact- Training needs procured to ensure staff are aware of their values and beliefs to ensure non-discrimination
Opportunities to support Learning Disability service users experiencing gender based violence are maximised.	None
Positive attitudes towards the resettled refugee community in Inverclyde are promoted.	Positive Impact – The new project will ensure all service users and Inverclyde communities are not discriminated against

CLINICAL OR CARE GOVERNANCE IMPLICATIONS

6.5 There are no clinical or care governance implications arising from this report.

6.6 NATIONAL WELLBEING OUTCOMES

How does this report support delivery of the National Wellbeing Outcomes?

National Wellbeing Outcome	Implications
People are able to look after and improve their own health and wellbeing and live in good health for longer.	Staff will provide a ROSC approach within the new project outreach service to ensure users have access to a range of local supports and promoting a recovery-focused ethos

People, including those with disabilities or long term conditions or who are frail are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community	Staff will provide a holistic approach, assessing the needs of the individual and referring to appropriate services
People who use health and social care services have positive experiences of those services, and have their dignity respected.	Project aims to provide new pathways for service users to improve engagement and recovery
Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.	The new project will ensure service users have access to an evidence-based service which will meet their needs
Health and social care services contribute to reducing health inequalities.	All service users will be assessed using a standardised assessment tool including physical and mental assessment needs
People who provide unpaid care are supported to look after their own health and wellbeing, including reducing any negative impact of their caring role on their own health and wellbeing.	New project aims to provide new access to services for those unable to attend within current working hours. The Service will ensure it is responsive and flexible to meet and accommodate the needs of the individual
People using health and social care services are safe from harm.	New project implemented will support the reduction in alcohol and drug related deaths and repeat presentations/admissions to hospital
People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide.	Staff will be encouraged to raise opinions and views on service improvements models through completion of survey monkey and sub group discussions
Resources are used effectively in the provision of health and social care services.	New project will ensure people get the right care, at the right time, in the right place and from the right service and profession.

7.0 DIRECTIONS

7.1

Direction Required to Council, Health Board or Both	Direction to:	
	1. No Direction Required	
	2. Inverclyde Council	
	3. NHS Greater Glasgow & Clyde (GG&C)	
	4. Inverclyde Council and NHS GG&C	X

8.0 CONSULTATION

8.1 The report has been prepared by the Chief Officer of Inverclyde Health and Social Care Partnership (HSCP) after due consideration with relevant senior officers in the HSCP.

9.0 BACKGROUND PAPERS

9.1 Appendix 1 Project Plan

6 months Project Plan 2019/20			
	Actions	Who	Progress as at Feb 2020
October – November 2019	<ul style="list-style-type: none"> ▪ Recruit Band 7 Project team lead • Recruit part time business support post ▪ Recruit Band 6 Liaison. ▪ Establishment of Steering Group Meetings • Evaluation Grip and Project Plan Development. 	<p>ADP Coordinator/ADRS Service Manager</p> <p>Chaired by ADRS Service Manager</p> <p>ADP Coordinator/ADRS Service Manager/ CORRA lead</p>	<p>Project Team lead in post</p> <p>Business Support post now commenced</p> <p>Successful recruitment, awaiting start date for position</p> <p>Steering Group established and meeting 6 weekly</p> <p>Developed and currently being implemented by Project Lead</p>
November-February 2020	<ul style="list-style-type: none"> ▪ Process map current referral and patient flow for ED and acute wards to liaison team. ▪ Develop interface and pathways between ED and liaison team ▪ Develop interface and liaison to extend across all IRH acute wards to support improved seamless discharge and joint working with home from hospital social work team ▪ Develop pathways for primary care to a range of 	<p>Project Team Lead</p> <p>Project Steering Group</p> <p>Project Manager/Primary</p>	<p>Flow chart completed</p> <p>Standard Operating Procedure for Alcohol and Drug repeat Attenders developed and implemented</p> <p>Re-established links with ED, Training plan being delivered to ED staff by Addiction Liaison Nurses</p> <p>Treatment pathway developed, to be discussed with GP's at GP Forum in March 2020</p>

	<p>appropriate treatment</p> <ul style="list-style-type: none"> ▪ Procure appropriate training for current staff to allow home detox opportunities to be delivered. ▪ Identify other workforce requirements ▪ Discussions around Out of Hours Model: Crisis/Recovery Options/Access to Treatment. ▪ Current Recovery commissioning to include out of hours 	<p>Care Public health Service Manager</p> <p>Project Team lead/NHSGGC ADRS Professional Nurse</p> <p>ADRS Service Manager</p> <p>ADRS Service Manager/Recovery lead/ Project Lead</p>	<p>Training needs identified, awaiting training dates</p> <p>Ongoing as part of ADRS Redesign</p> <p>Staff /patient questionnaires developed and awaiting distribution. Awaiting discussion with NHS and Social care staff reps prior to distribution of staff questionnaires</p> <p>Patient focus groups identified with current services users and peer support workers to test change in Recovery in out of hours support services.</p> <p>Face to face discussions currently taking place with ADRS staff groups to discuss service test of change</p> <p>Included in Test of Change contracts with 3ed sector</p>
<p>By April 2020</p>	<ul style="list-style-type: none"> ▪ Develop and deliver continual training and education involving screening and ABIs to 	<p>Project team Lead /Professional Nurse Adviser.</p>	<p>Arrangements to attend GP Forum to present new CORRA project, offer training prior to initiation of outreach service</p>

	<p>staff across acute and primary care.</p> <ul style="list-style-type: none"> ▪ Establish one evening clinic ▪ Commence home detox opportunities. 	<p>Project lead</p> <p>Project lead</p>	<p>Currently in discussion with ADRS Team Leads to establish appropriate evening clinic day, awaiting feedback of staff/patient questionnaire to determine need of treatment/support</p> <p>Standardised Alcohol detoxification procedure obtained. Assessment and treatment pathway developed for Supported Home Detox Standardised operational procedure guidelines for outreach service in development</p>
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