

WEST DUNBARTONSHIRE COUNCIL

Report by the Acting Director of Social Work Services

Health Improvement and Social Justice Partnership: 17 May 2006

Subject: West Dunbartonshire Addiction Services – Service Developments

1 Purpose

1.1 This report presents an update on developments within West Dunbartonshire Addiction Services, in light of recent funding from the Scottish Executive and the dissolution of Argyll & Clyde NHS Board, which are both set within the wider context of the West Dunbartonshire Corporate Action Plan for Alcohol and Drugs.

2 Background

2.1 In May 2005, a report was presented to the Partnership outlining proposed developments for addiction services. A follow-up report was presented in August outlining funding uplifts from the Scottish Executive.

2.2 In the time since those reports, new posts have been filled and preliminary performance criteria (see Appendix 1) established.

2.3 Another significant development has been the dissolution of Argyll & Clyde NHS Board from April 2006 and the institution of the West Dunbartonshire Community Health Partnership (CHP), having a direct impact on addiction services within the former Lomond LHCC area.

2.4 These developments and wider service planning are encapsulated within the West Dunbartonshire Corporate Action Plan for Alcohol and Drugs, also referred to as the CAP.

2.5 The CAP is the reporting framework to the Scottish Executive for addiction planning and is grounded within national planning documents, including:

- The “*National Plan for Action on Alcohol Problems*”, produced by the Scottish Executive, its main purpose being to identify national priorities and reduce alcohol related harm.
- “*Scotland’s Drugs Strategy, Tackling Drugs in Scotland: Action in Partnership*” launched a national partnership against drug misuse. The 4 pillars of *Young People, Communities, Treatment and Availability*, link closely with the priority areas within the “*National Plan for Action on Alcohol Problems*”.

- 2.6 Within West Dunbartonshire partners have agreed that the CAP and associated Implementation Plan would be reviewed on a 6 monthly basis. The first review in September 2005 was completed and the results, along with recommendations regarding future priorities and actions, were presented to stakeholders across the West Dunbartonshire area.
- 2.7 A subsequent multi-disciplinary planning/consultation event took place on 22nd February 2006 to agree the detail of the 2006/07 CAP Implementation Plan. Approximately 50 delegates took part and the results enabled local improvement targets, linked specifically to addiction related services, to be established. Priority areas, against which our progress would be measured by the Scottish Executive in 2006/07, were also identified.
- 2.8 A report (soon to be put onto an addictions web page and currently available upon request) by those who took part in both the review and the planning/consultation event was submitted to the Executive at the end of April 2006.

3 Main Issues

Direct Service Developments

- 3.1 In the May and August reports to the Partnership, the planned use of new resources were identified, including new appointments of a Senior Social Worker and Homemaker, as well as plans to fill a vacant post. All posts have been filled.
- 3.1.1 The report also noted progress towards integration and partnership, driven by the Addictions Planning and Implementation Group (APIG) and the West Dunbartonshire Alcohol and Drug Forum, across all addiction related services, including:
- The use of *Single Shared Assessments (SSA)* across all services, to enable information sharing and timely referrals between services. Since the last report, four training days have been held and over 100 staff trained in the use of the SSA. SSA's are becoming the standard referral tool between addiction services.
 - *Joint Training* programmes have been a long-standing feature of local partnership efforts, including a regular programme of addiction related topics via STRADA (Scottish Training on Drugs and Alcohol). Further funding has been secured via the Scottish Executive to enable training for over 300 professionals working with children and/or families where addictions feature. These programmes run through June 2006, with a reserve list building and further training planned for the Autumn. A joint training event has also been organised for May and June 2006 for specialist workers, assisting them to develop skills in working with individuals through an approach known as Motivational Interviewing. This training has also been funded following a successful bid for Executive funds.
- 3.1.2 The May report noted performance issues and the relationship to West Dunbartonshire Council's Corporate Plan. An initial performance framework has been agreed among all addiction partners (see **Appendix 1**).

- The agreed targets form part of the wider Joint Future Local Improvement Targets (LITs).
- Addiction partners have identified additional performance areas, including the establishment of client defined service *outcomes*. Additional LITs will be confirmed in the Autumn.

Dissolution of Argyll & Clyde NHS Board

- 3.2** Addiction services have operated differently across the authority, as highlighted in the May 2005 report to the Partnership.
- 3.2.1** Within the Greater Glasgow side of West Dunbartonshire, an integrated Community Addiction Team (CAT) operates, joining health and social care workers in a single team.
- 3.2.2** In the former Argyll & Clyde Health Board area, Council services have operated through agreed protocols with health based services, but from separate teams.
- 3.2.3** The dissolution of Argyll & Clyde NHS Board and the establishment of the CHP have led to the confirmation of joint management arrangements across NHS and local authority addiction services, with a single manager for operations.
- 3.2.4** Forward planning under the new management structure is at an early stage. Priority issues are being identified, including the need to establish appropriate premises (Dumbarton/Vale of Leven) for services and to allow co-location of NHS and local authority staff.

Corporate Action Plan for Alcohol and Drugs (CAP)

- 3.3** The 2005/06 CAP was reviewed in September 2005, and six priority areas were identified – Services for Children and Young People; Community Participation; Needs of Older People; Availability of Drugs and Alcohol; Communications; Performance Monitoring.
- 3.3.1** The 2006/07 CAP reported on progress against these priorities as well as the wider 2005/06 Implementation Plan. The CAP report suggests good progress against most agreed actions.
- 3.3.2** For 2006/07 an updated Implementation Plan has been agreed, reflecting the four pillars of the National Plans – Young People/Education; Culture Change; Treatment; Protection/Controls/Availability.
- 3.3.3** The CAP will be reviewed mid-year in September 2006 to highlight progress and areas for increased effort.
- 3.3.4** The CAP also records Local Improvement Targets (as noted above and detailed within Appendix 1).

4. Personnel Issues

- 4.1 The direct operational management of NHS Addiction staff across West Dunbartonshire has transferred to the Joint Manger for Addiction Services.
- 4.2 The Joint Manager for Addiction Services has a reporting line to both the Council (Social Work Services) and the CHP.

5. Financial Implications

- 5.1 The use of addiction services funds was previously presented to the Partnership. There are no further financial implications.

6. Conclusions

- 6.1 Developments previously presented to the Partnership are continuing, driven through multidisciplinary partnership structures.
- 6.2 Joint management arrangements have been extended to Dumbarton and the Vale of Leven areas and the establishment of an integrated team is being progressed.
- 6.3 The Corporate Action Plan for Drugs and Alcohol is the vehicle in which we measure our activity in relation to addiction services across the whole of the West Dunbartonshire area. Through the CAP we are accountable locally to the Health Improvement and Social Justice Partnership and nationally to the Scottish Executive.
- 6.4 The CAP provides the partnership framework for addiction focussed activity across West Dunbartonshire.

7. Recommendations

- 7.1 To note the continuation of accountable, performance led addiction services across West Dunbartonshire.
- 7.2 To note the priority action areas identified by partners as a result of the review of the CAP and the subsequent Planning/Consultation Event.
- 7.3 To note both the local and national lines of accountability regarding the CAP.

7.4 To support appropriate joint work as identified as part of the CAP.

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Background Papers:

- *National Plan for Action on Alcohol Problems*
- *Scotland's Drugs Strategy, Tackling Drugs in Scotland: Action in Partnership*
- *West Dunbartonshire Corporate Action Plan for Alcohol and Drugs*
- *Report to the Health Improvement and Social Justice Partnership – 18 May 2005*
“Integrated Addiction Services for West Dunbartonshire”
- *Report to the Health Improvement and Social Justice Partnership – 24 August 2005*
“Allocation of Additional Funding for Alcohol and Drug Services”

Wards Affected: All wards are covered by the Corporate Action Plan for Alcohol and
Drugs
All wards are covered by Joint Management of NHS and Social Work
resources.

APPENDIX 1

Performance Targets for Addiction Services

(additional performance targets in development)

Proposed Service Improvement	Reporting Frequency/Data Source	Baseline Target	Annual Targets
Increase number of individuals accessing addiction services	Quarterly/Service Waiting Times Figures ¹	Set in 2005/06 ²	Increase number of new clients by 5% per annum
Reduce waiting times between referral to service and first appointment	Quarterly/Waiting Times Figures	July – September 2005 = 58% of individuals offered first appointment within 14 days of referral	90% of clients seen within 14 days ³
Improve access to integrated addiction services through increased number of Single Shared Assessments (Addictions) completed	Quarterly/Scottish Executive Returns (via SSA Health and Social Care Team)	2004/05 = 2	Increase number of SSA's, by 10 in year one and subsequently by 20% per annum 2005/06 = 12 2006/07 = 14 2007/08 = 17
Improve range of service choice for individuals	Annual/Focus Groups and Surveys	To be set following first results of Focus Groups and Surveys	To be set following first results of Focus Groups and Surveys

¹ Shifting to use of SMR 25's when established

² Incomplete reporting in 2004/05 requires baseline to be established in 05/06

³ Target still to be confirmed by partners