

MAT STANDARDS IMPLEMENTATION PLAN: QUARTERLY/MONTHLY PROGRESS UPDATE

This progress update sets out quarterly or monthly progress against the delivery of the MAT Standards Implementation Plan, as well as the related quarterly reports required for the Drug and Alcohol Waiting Times and the Treatment Target.

Integration Authority	Aberdeenshire
Period covered	January to March 2023

This update is submitted by the lead officer/postholder nominated to ensure delivery of this Implementation Plan:

Name	Position/Job Title	Contact details
Completed by Gillian Robertson on behalf of Pam Milliken	Project Manager Chief Officer HSCP	Gillian.robertson4@aberdeenshire.gov.uk Pam.milliken@aberdeenshire.gov.uk

MAT Standard 1	All people accessing services have the option to start MAT from the same day of presentation.		
Actions/deliverables to implement standard 1	Timescales to complete	Progress in period	Risks
Secure premises for opening of local Step-In access points in each of the five main towns in Aberdeenshire and ensure implementation plans are in place and on track for each location	Peterhead by 30 September 2022 Inverurie by 30 November 2022 Banff by 31 st January 2023 Fraserburgh and Stonehaven by 31 st March 2023	All 5 areas have commenced operating the Step-In process with all referrals being assessed and started on treatment by this team. Premises have been secured in Peterhead and Banff and we have leased premises in Fraserburgh for a year. Premises have been identified in Inverurie and work ongoing to get final approvals and plans in place. Temporary accommodation has been identified in the meantime. Stonehaven do not have permanent premises yet and operating in local hospital and in communities	Premises in Stonehaven is a challenge and final sign off required for Inverurie. Working with HSCP property team to resolve
Recruit staff for each of the Step-In locations Begin scoping to consider resource requirements for families	31 st October 2022	Completed, all staff in post and operational in Step In access points.	
Up to date Grampian prescribing guidelines for all types of Opiate Substitute Therapy	31 ST March 2023	Completed and submitted as part of MAT return for end of March 2023	

<p>Standard Operating Procedure in place for all Step-In services and reviewed to incorporate learning and feedback</p>	<p>31st March 2023</p>	<p>Completed and submitted to MIST as part of annual return</p>	
<p>Development of marketing materials and promotion of new approach to all partners and communities</p>	<p>28th February 2023</p>	<p>Communication on contact details, drop in addresses have been circulated widely. Awaiting a logo and working with corporate comms to develop communication further. Web page being created in HSCP site.</p>	
<p>Monitor and evaluate activity in first six months of opening and implement improvements required</p>	<p>30th July 2023</p>	<p>Review been done in Peterhead and findings circulated and improvements in place. Other locations will be reviewed in May</p>	
<p>Identify areas out with Step-In locations where bespoke service delivery is required and action to provide the service in these areas</p>	<p>31st March 2023</p>	<p>Work ongoing on identifying areas of need. Patients from all areas going through Step In process and being seen at the most appropriate venue. Identification of suitable locations is progressing to provide a hub and spoke model for Step In</p>	
<p>Assessment of Progress:</p>	<p><i>Red/Amber/Green¹</i> Green</p>		

Comment / remedial action required

Early feedback from the MIST team is that we will have achieved Green for MAT 1, May be provisional green as experiential information is not adequate to fully evidence appropriate feedback from people in service. Submission to MIST for the annual review included a range of process documentation as well as recent data as requested by MIST.

¹ **Green** - On track to achieve actions/ deliverables; **Amber** - Some delays to deliver but remedial action will enable delivery; **Red** - delays to delivery which require significant remedial action

MAT Standard 2	All people are supported to make an informed choice on what medication to use for MAT and the appropriate dose.		
Actions/deliverables to implement standard 2	Timescales to complete	Progress in period	Risks
Up to date prescribing guidance available for all types of Opiate Substitute Therapy (OST) medication	31 st March 2023	Completed and provided to the National MIST team	
National OST leaflet localised for Aberdeenshire	31 st March 2023	Part of the pan Grampian group to allow consistency across the Board. Other leaflets are also available for the range of prescribing options	
Increase prescribing pharmacist capacity and establish improved links with community pharmacy to ensure medication reviews are conducted regularly and reach of choice is as wide as possible	31 st March 2023	Decision sheet in progress to inform on success of this application for funding from ADP allocation. This will allow increased prescribing and technician support to increase joint working with pharmacies.	
Consideration on how Buprenorphine can be provided at every stage including Step-In access points	31 st March 2023	Step In premises ready have been assessed and CD cupboards being fitted. Already in place in Peterhead	
Data analysis in place and reviewed quarterly with actions required where choice is not evidenced in these figures	31 st March 2023 ongoing review and development	Ongoing and reviewed as part of Step In. Data submitted as part of annual	Analysis support on Maternity leave

		review by MIST. Using DAISy data and liaising with National DAISy team as well as receiving the fortnightly DAISy extract. There is a Grampian wide group to support progression of data including Health Intelligence support. They will receive DAISy data and complete a dashboard for the three areas in Grampian	
<p>Increase safe prescribing capacity in the service by</p> <ul style="list-style-type: none"> • Recruiting additional Consultant capacity • Securing Non-Medical Prescribing places for nurses 	<p>31st Dec 2022 31st March 2024 Complete NMP</p>	<p>5 nurses started NMP at end of September and have passed. A further 4 nurses started this course March. A further 5 will start in September. Consultant vacancy unsuccessful in recruiting. Progressing recruitment of locum.</p>	<p>Consultant will be off for 6 months from July. Have recruited a Physician associate and staff to complete Mental State Assessments to support</p>
Assessment of Progress:	Red/Amber/Green Green		
<p>Comment / remedial action required We have been advised by the MIST team that our score will be green/ provisional green as per MAT 1. A range of information and data has been submitted to evidence our implementation of MAT 2 across Aberdeenshire. The increased capacity through Non-</p>			

Medical prescribing training and additional Pharmacists for prescribing will support the embedding and sustainability of this standard across all areas of Aberdeenshire

¹ **Green** - On track to achieve actions/ deliverables; **Amber** - Some delays to deliver but remedial action will enable delivery; **Red** - delays to delivery which require significant remedial action

MAT Standard 3	All people at high risk of drug-related harm are proactively identified and offered support to commence or continue MAT.		
Actions/deliverables to implement standard 3	Timescales to complete	Progress in period	Risks
Secure finance and recruit to increase capacity to provide increased visibility in response to all Near Fatal Overdose (NFOD) and outreach support for those at risk of harm or death.	30 th September 2022	Staff recruited to increase capacity and to provide backfill to release staff.	
Hold development day which results in action plan for further development of ARIES across Aberdeenshire	30 th September 2022	Completed and Action Plan in place for further development of the service	
Review data collection and provide activity information to promote understanding of the impact of ARIES and the partnership work involved	30 th November 2022	The MIST spreadsheet was used to capture data of the submission to the end of March Also attending Grampian Mat data group and have Outreach activity on DAISy as it also contributes to MAT 1 etc.	
Develop the Service further through involvement with wider partner activities including <ul style="list-style-type: none"> • Safer in Service: Days of Action • Joint Cuckooing Initiative • Criminal Justice Outreach Post • Housing Service 	31 st December 2022 ongoing review and development	This process has been working well and quarterly Safer In service continue to provide a valuable partnership approach to reaching those at	

		high risk of harm or death. Aries team piloting a 6-day service from April. A review of the outreach team is to take place in June 23	
Review of Information governance procedures	31 st September 2023	Ongoing	
Ensure client and family feedback is captured and case studies recorded to support promotion of service and further improvements are implemented as a result of feedback	31 st March 2023 and ongoing review	Some people and family members have provided feedback for the experiential capture. We continue to review how best this is done and will establish a specific questionnaire for Outreach activity	
Assessment of Progress:	<i>Red/Amber/Green</i> Green		
<p>Comment / remedial action required Experiential feedback required to support very good progression with MAT 3. Recognition that we will need to catch up in collection of this in a short time but are still very hopeful this can be achieved. The capture of experiential applies to all elements not just 3. A full range of data and process documents has been submitted to MIST for 22/23, MIST indicate we will be green for this standard.</p>			

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MAT Standard 4	All people are offered evidence-based harm reduction at the point of MAT delivery.		
Actions/deliverables to implement standard 4	Timescales to complete	Progress in period	Risks
Review of staff training in relation to all aspects of Harm Reduction. Training plan established through Learning and Development Group and link to other relevant training Groups.	30 th September 2023	Staff have undertaken a range of harm reduction training including local needle exchange training and Scottish Drugs Forum 2-day training. Naloxone trainers are in place and continue to provide training as part of induction as well as refresher/upskilling training. Links have been made with Tissue viability and pathways on place for wound care and treatment	
Harm reduction equipment and assessment will be made available at every intervention	30 th September 2022	We have a new contract with a third sector provider across Aberdeenshire who will provide innovative ways of ensuring HR equipment reaches those in need. Each Step in will have a full range of equipment with all staff	Awaiting suitable premises in a couple of areas

		trained on assessment and issue	
<p>Work with BBV, Sexual health and wound care teams etc to provide improved testing and access to services and support including establishing client pathways to access appropriate support.</p> <p>Consultant support in place to ensure harm reduction response is in place for benzodiazepine use</p>	30 th November 2022	<p>Pathways in place, additional BBV testing support from central teams offered.</p> <p>Additional consultant post was unsuccessful and will be advertised</p>	
<p>Recruit additional Health Care Support Workers to support</p> <ul style="list-style-type: none"> • BBV testing • Vaccinations • Assessment of Injecting Risk • Wound assessment and escalation if required • Provision of injecting equipment • Provision of Naloxone <p>Identification of other health issues</p>	31 st December 2022 ongoing review and development	In place and training well underway, good share of skills including third sector contracted provision. Pathways for Wound assessment in place	
Data capture established and ongoing review of this	31 st March 2023	Reporting through places of intervention, increase through Step In, using MIST data capture. NEO also used for data capture	
Establish Harm reduction workers in HMP Grampian and capture these activities and outcomes	31 st March 2023 and ongoing review	Recruitment completed and training etc underway. Staff will be attending training alongside staff in the HSCP Drug and Alcohol teams	

Assessment of Progress:	<i>Red/Amber/Green</i> Green			
<p>Comment / remedial action required</p> <p>A wide range of information was submitted to MIST to evidence our delivery of Harm Reduction activities across Aberdeenshire. MIST have indicated that we should be green for this standard at the end of year review.</p>				

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MAT Standard 5	All people will receive support to remain in treatment for as long as requested.		
Actions/deliverables to implement standard 5	Timescales to complete	Progress in period	Risks
<p>Provide flexible models of care to meet client needs including:</p> <ul style="list-style-type: none"> • Stepped Care with pharmacy prescribers and third sector key workers • Shared care with 3 monthly clinical service prescribing and HCSW or third sector key workers • Shared care with GP • Pharmacy Buvidal clinics • Increased clinical and social work interventions at times or need or crisis • Range of support including HSCW and Local area coordinators to support with healthcare needs and assist with practical and social tasks 	<p>31st March 2023 and ongoing review of activity and retention</p>	<p>Review of caseloads identified increased need for stepped care capacity, approval of this additional capacity is being issued, HCSW and LAC roles utilised in offering lower level interventions with health and social focus.</p> <p>Uptake of Buvidal continues to increase and review of pharmacy clinics will take place early in the next operational year.</p> <p>Staff trained in acupuncture and increased opportunities for group work.</p> <p>Open door to respond to crisis and holistic support provided utilising other organisations/partners support where required</p>	
<p>Implement tests of change to support retention and offer variation of support including:</p> <ul style="list-style-type: none"> • Canine therapy interventions • Employability Interventions • Occupational Therapy 	<p>31st March 2023</p>	<p>Canine therapy started and has been assessed but not considered appropriate to continue due to restricted numbers of clients appropriate</p>	<p>OT capacity, we had hoped to increase this but funding not</p>

		<p>for this intervention. Discussions with employability lead resulted in their service being keen to be present for provide employability support at Step In. OT started and is working well as part of the service; a report has been provided on this and the OT presented at a recent MATSIN meeting. Physician Associate recruited to support wider interventions and staff recruited to complete Mental State Assessments. Support available through Whole Family Approach project. Meeting arranged to look at a TOC to support women experiencing harm and complexity</p>	available at the moment
Review of service opening times and consideration of evening and weekend opening where demand indicated or to test	31 st March 2023	Step in in Peterhead is open every Monday until 7, other areas reviewing and seeing people out with 9-5 where required. ARIES start testing Saturday working from April	
Establish clinical caseload sheet with RAG rating to support effective caseload management	31 st October 2022	Completed	

<p>Promotion of wider activities in community and support to access these in order to allow meaningful activity to change routine and give structure, purpose and diversion</p>	<p>31st March 2023</p>	<p>Linking with partner orgs etc all keen to work in partnership. Peer Support promoted through contracted provision and advice provided to clients on local groups and activities in communities and online. LAC role includes supporting people to access these activities and support</p>	
<p>Identify wider support services to be part of service offering and operate collaboratively with client at forefront of discussions and plan</p>	<p>31st March 2023</p>	<p>As above and Welfare advice worker and Housing also supporting service offering.</p>	
<p>Assessment of Progress:</p>	<p><i>Red/Amber/Green</i> Green</p>		
<p>Comment / remedial action required We have submitted a range of information and Data to MIST for the year end submission. Indications from MIST is that we will be green for this standard. Service continually looks for new approaches and resources to support people in service and use the TOC process.</p>			

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MAT Standard 6	The system that provides MAT is psychologically informed (tier 1); routinely delivers evidence-based low intensity psychosocial interventions (tier 2); and supports individuals to grow social networks.		
Actions/deliverables to implement standard 6	Timescales to complete	Progress in period	Risks
Establish a steering Group for MAT 6 implementation and monitoring as a subgroup of the Substance Use Service Learning and Development Group	31 st March 2023	Steering group established and as a joint approach with Aberdeen City. TOR being completed	
Have an explicit service plan in place for delivering psychologically-informed care and structured psychosocial interventions. Plans will include: a) a baseline assessment of current service delivery from which to plan and build progress, and an in-built process for service evaluation and improvement; b) an explicit workforce development policy that ensures all staff receive appropriate training to deliver psychologically-informed care and structured psychosocial interventions; c) policies and procedures that support the translation of skills acquired through training into practice. These include – access for staff to regular coaching, reflective practice, and supervision to support the delivery of psychologically-informed care and structured psychosocial interventions; – clearly defined roles for delivering structured psychosocial interventions within staff job plans, and protected time to do this; – caseload sizes that allow staff to routinely deliver structured psychosocial interventions;	31 March 2024	In progress Coaching groups for MI have been established and have been delivered across the Shire. A SLWG is meeting to review coaching delivery and capacity considering the increased number of staff etc. A baseline was conducted as part of a CORRA project and this will be reviewed to see if still fit for purpose. A draft workforce plan has been completed and	Coaching absences and pressure on coaching capacity. Capacity issues for staff to deliver low intensity PI for both substance use and mental health Limited capacity to deliver supervision specifically for PIs

<p>– identification and use of supportive tools, protocols, manuals and safety and stabilisation strategies to support staff in their delivery of psychological interventions.</p>		<p>will be reviewed by the steering group.</p> <p>Caseload sizes continue to be reviewed and work is ongoing to ensure all posts are filled. Further training has been arranged for this operational year</p>	
<p>Establish that clear pathways are in place to ensure that people can access higher intensity Tier 3 & 4 psychological therapies if and when required</p>	<p>31/3/24</p>	<p>There has been some progress on this for some clients. Will need further development to allow a consistent pathway to appropriate cases etc.</p>	<p>Restricted capacity for Tier 3&4 within current resources</p>
<p>Support the development of social networks by:</p> <p>a) actively promoting and linking people to services that place an emphasis on support from mutual aid and other recovery networks. There should be a clear and realistic recovery plan that outlines the network of support available to the person, including key people in their life;</p> <p>b) providing support to build social capital through the promotion of connections with people in mutual aid or other pro-recovery networks;</p> <p>c) providing social bonding and social bridging interventions, specifically designed to modify a person’s social networks, including work with families or named persons</p>	<p>Timeframe to be confirmed by Peer Support Service/Community Forums/ groups</p>	<p>In Progress</p>	
<p>Establish data capture which allows review and analysis of achievement of MAT 6 across all parts of the services.</p>	<p>31st July 2023</p>	<p>This will be agreed by the steering group</p>	

Assessment of Progress:	<i>Red/Amber/Green</i> Amber			
<p>Comment / remedial action required The steering group has met once so further development required including TOR and action plan. Information has been supplied to MIST and indication is that Aberdeenshire will be rated amber for this standard.</p>				

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MAT Standard 7	All people have the option of MAT shared with Primary Care.		
Actions/deliverables to implement standard 7	Timescales to complete	Progress in period	Risks
Pilot in Fraserburgh GP surgeries to provide additional resource to allow OST delivery in GP surgeries – Recruitment of 3 staff, clearing of documents to allow suitable delivery space, Action plan for development of service and review	31 December 2022	Pilot started in January 23. Cases have been moved from community team to GP team	Lack of space and time at one of the surgeries, raising with HSCP PC lead to support additional access if possible
Mapping of availability of OST in surgeries across Aberdeenshire	31 March 2023	Initial scoping has taken place to identify what is available in each of the surgeries.	
Involvement in review of community pharmacy and identify increased capacity available in community pharmacy	31 March 2023/ 31 December 2022	Additional funding has been agreed and further recruitment will take place early 23/24. This includes technician support to work with the service and pharmacies..	
Discussions with GP surgeries where there is limited or no OST available with a view to agreeing how this could be best delivered in GP/Pharmacy setting	30 June 2023	Discussion taking place with consultant Psychiatrist from the service and HSCP PC lead to establish how best to take forward with GPs.	
Data capture of pilot and comparison to other areas completed to support evaluation	30 th June 2023	Ongoing data being agreed	
Establish shared care protocols between specialist services, GP and community pharmacies for people who	31 st March 2024	Ongoing	

are on MAT. Shared care may include prescribing where competent practitioners are in place				
Clinical and governance structures that enable people working in primary care to fully support people who are on MAT and to ensure that treatment and prescribing are managed alongside care for physical, emotional, and social needs		31 st March 2024	Ongoing	
Contractual arrangements for primary care provision (GP and community pharmacy) reflect the requirements of MAT standards;		31 st March 2024	Meeting with Aberdeen city to discuss developments for Grampian LES and Aberdeenshire ask	Support required from Most appropriate people
Develop pathways that enable the transfer of appropriate elements of care between specialist services, local mental health services, GP and community pharmacy		31 st March 2024	Started workshops are arranged to progress this further	
Establish information governance to ensure that information can be safely transferred between specialist services, GP and community pharmacy, including child and adult protection procedures		31 st March 2023	Started discussion around DPIAs	
Training on problem drug use and on awareness of local drug services, including non-statutory providers and peer support services for all staff who may encounter people with problem drug use in their work		31 ST March 2023	Training is being delivered to a range of partners. Recent communication has been circulated widely on how to access Drug and Alcohol services	
Establish a 'primary care facilitation team', or equivalent that is responsible for auditing, monitoring, reporting and reviewing practice in primary care settings and the interface with specialist care, and for support with workforce development.		31 st October 2023	Discussion with HSCP PC lead and consultant will cover how best we establish this	Consultant off for 6 months
Assessment of Progress:	Amber			
Comment / remedial action required				

MAT 7 group to establish availability of shared care across Aberdeenshire to support ongoing work to plan actions required Information submitted to MIST suggests we will receive an Amber rating for this. There are challenges in doing all of what is required for this by 31/3/2024 but we will make every effort to complete on all actions.

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MAT Standard 8		All people have access to independent advocacy and support for housing, welfare and income needs.		
Actions/deliverables to implement standard 8		Timescales to complete	Progress in period	Risks
Involvement in Tender specification process for procurement of Advocacy in Aberdeenshire to ensure capacity available for our client group		31 March 2023	Completed	
Co-fund a housing worker who will support those identified as high risk and who require support with housing needs, both public and private sector. This worker will work closely with our Outreach/NFOD team - ARIES		31 December 2022	Completed	
Secure appropriate wider support services e.g. Welfare, housing, advocacy to have a presence in Step In premises to meet client need		30 June 2023	Housing have agreed to provide a worker for some regular attendance at Step In in Peterhead and Fraserburgh. Welfare rights will provide fast access to a worker who will see clients at Step In. We will	

		test this and look for additional funding is a post is required to meet demand of people in service. Contact made with the new advocacy contract and national advocacy provider. Training will be provided to staff on all these resources and how to engage with clients to support access.	
Increase collaborative work with Housing colleagues including appropriate awareness training etc.	31 st December 2022	Training package being delivered to Housing First colleagues. Additional funding agreed to increase capacity and allow attendance at Step In etc. Training also being delivered to wider housing colleagues. Up to date contact details and useful information being shared with staff. Information sessions have been offered for our staff from housing colleagues.	
Link with Tackling Poverty and Inequality and Employability groups to ensure our client group are aware of and have access to a range of wider supports	31 st March 2023	Arrangements well developed for Link Welfare Rights worker to North Step In teams. Faster pathways being developed for South and Central teams.	
Have recording in place that evidences where advocacy has been discussed and take up monitored	31 st December 2022	Recording on clinical spreadsheet	

<p>Discussion with Advocacy providers to establish training needs in both services and plan to address this, maintain regular contact and discuss how delivery can be accessible for clients</p>	<p>30th June 2023</p>	<p>Contact made and training/ awareness sessions been arranged to ensure all staff aware and appropriate referrals are made.</p>	
<p>Assessment of Progress:</p>	<p><i>Red/Amber/Green</i> Amber</p>		
<p>Comment / remedial action required New Advocacy contract in place from 1/4/23. Wider support available being arranged within Step In in the North and this will be adapted for services in South and Central once premises available and needs identified. Range of information provided to MIST and this indicates we will likely be rated as Amber for this standard.</p>			

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MAT Standard 9	All people with co-occurring drug use and mental health difficulties can receive mental health care at the point of MAT delivery.		
Actions/deliverables to implement standard 9	Timescales to complete	Progress in period	Risks
<p>Steering group to be established to allow developments expected from both Mental Health Services and Alcohol and Drug services to be taken forward, see below, and provide the collaborative approach required to achieve MAT 9 delivery</p> <p>Consultant support in place to develop</p>	<p>31ST March 2023</p> <p>31st March 2023</p>	<p>Initial meeting held and workshop and training sub group identified as required</p> <p>Existing Drug and Alcohol Consultant supporting in meantime</p> <p>Workshop arranged for both teams to come together in April</p>	<p>Psychiatry capacity</p>
<p>Mental health services have:</p> <p>9.1 procedures in place to ensure that staff in mental health services are up to date with local substance use treatment pathways and the referral criteria for NHS primary and secondary care services, social care and third sector agencies;</p> <p>9.2 mechanisms in place to enable staff in mental health services to report concerns and advocate on behalf of patients at risk of falling between services;</p> <p>9.3 agreed referral pathways across the local recovery orientated systems of care to support any identified substance use;</p>	<p>31st March 2024</p>	<p>Work started identifying actions at April workshop TOC to start in Banff</p>	

<p>9.4 at the point of referral a named professional as the main contact responsible for communication between services, and with the person and their family member or nominated person;</p> <p>9.5 training and workforce development plans to ensure staff are trained and supported to:</p> <p>a) Carry out assessment of substance use and dependence;</p> <p>b) recognise acute crises such as overdose, withdrawal or physical health consequences;</p> <p>c) provide accurate and evidenced based harm reduction information and support to people with non-dependent substance use;</p> <p>d) provide motivational interviewing where appropriate.</p> <p>9.6 protocols in place for effective communication and information sharing with substance use services;</p> <p>9.7 clear governance structures in place to co-ordinate care (e.g. care programme approach) and establish effective joint working arrangements to care for those with severe mental illness and substance use.</p>		<p>Outcome from workshop and Steering group to ensure progressed and have all documents required</p>	
<p>Substance use services have:</p> <p>9.8 procedures in place to ensure substance use services are up to date on knowledge of local mental health services and their referral criteria;</p> <p>9.9 agreed care pathways in place to support any identified mental health care needs and clear governance structures to establish effective joint working arrangements to care for people with co-occurring mental health difficulties and substance use;</p>	<p>31st March 2024</p>	<p>Workshop identified actions required to progress these actions. Action plan to be written up by facilitators. Existing processes and</p>	

<p>9.10 mechanisms in place to enable staff in substance use services to report concerns and advocate for patients at risk of falling between the gaps of services;</p> <p>9.11 assessment protocols in substance use services that include enquiry about mental health, and use of appropriate screening tools;</p> <p>9.12 appropriate protocols to treat and support mental health in house (to level of competency of agency/individual) or support local onward seamless referral;</p> <p>9.13 training and workforce development plans to ensure staff are trained and supported to:</p> <p>a) ensure staff have the knowledge and skills to recognise acute mental health crises: suicidality/ psychosis and respond appropriately;</p> <p>b) know about availability, and make use of skilled diagnosis and treatment within substance use teams if not available through mental health assessment services;</p> <p>c) make use of local protocols around severity and complexity of mental health disorder for treatment in substance use, primary care or mental health teams.</p> <p>9.14 at the point of referral a named professional agreed as the main contact responsible for communication between services and with the person and their family member or nominated person;</p> <p>9.15 protocols in place for effective communication and information sharing with mental health services;</p> <p>9.16 clear governance structures in place to co-ordinate care (e.g. care programme approach) and establish effective joint working arrangements to care for those with severe mental illness and substance use.</p>		<p>procedures that comply with actions to be written up to inform collaborative approach, shared and expand existing good practice and identify areas requiring further development</p>	
<p>Assessment of Progress:</p>	<p><i>Red/Amber/Green</i> Amber</p>		
<p>Comment / remedial action required</p>			

Workshop with Alcohol and Drug services and mental Health arranged for April this will inform an action plan and identify leads. Submission to MIST includes current position and indications are that we will be Amber for this action.

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MAT Standard 10	All people receive trauma informed care.		
Actions/deliverables to implement standard 10	Timescales to complete	Progress in period	Risks
A steering group should be established to oversee the development and implementation of trauma informed care across MAT services	31 st December 2022	Established – Steering group covering MAT 6 and 10 has met once and will oversee actions required	
Have an explicit delivery plan in place for delivering trauma informed care which should; a) be informed by a baseline assessment of current trauma informed care delivery. A tool that can support this process is the Trauma-informed Care and Practice Organisational Toolkit (TICPOT); b) consider the physical environment in which MAT is delivered; c) include mechanisms to maximise staff wellbeing and reduce the risk of secondary traumatisation, burnout and compassion fatigue - such as policies for regular supervision; d) include people with lived experience of trauma and their family member or nominated person in all aspects of service delivery, evaluation and improvement planning (where the person wishes this); e) ensure that the knowledge and skills of the MAT workforce (including senior leaders) are aligned to the Transforming Psychological Trauma: Knowledge & Skills Framework; f) ensure alignment of practice with MAT Standard 6 Psychological support and the use of validated tools for routine trauma screening;	31 st March 2023	Draft delivery plan in place to be approved by steering group. Safety and stabilisation training been arranged for this year. Additional training has also been provided online by Epione	

g) ensure that service evaluation and continuous quality improvement is underpinned by the principles of trauma informed care.				
Assessment of Progress:	<i>Red/Amber/Green</i> Amber			
Comment / remedial action required Established steering group for MAT 6 and 10. Trauma informed walkthroughs of new premises to take place and plan to be developed to track progress. Information provided to MIST indicated that this is likely to be Amber rating for this standard.				

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Local Delivery Plan Standard: Drug and Alcohol Waiting Times

Please complete this section only if you did not achieve the Waiting Times Local Delivery Plan Standard.

The LDP Standard requires that 90% of people wait less than 3 weeks between referral and treatment. Please reference any actions in the MAT Standards Improvement Plan.

Q1 Performance:	87.2%
Q2 Performance:	90.8%
Q3 Performance:	91%
Q4 Performance:	96%

Key actions to improve performance	Timescales to complete	Progress in period	Risks
Increased capacity in statutory services – this is where the waits are, except 2, Blockages in these caseloads due to good retention rates in service but lack of onward prescribing through GPs etc. Increased in demand for both clinical and social work interventions continue	Depending on financial support given	Staff recruited to reduce caseload sizes	Still very short on Dr capacity with consultant sitting with extremely high caseload
Increase capacity for prescribing	By March 2023	5 staff started on NMP course this month	Financial support not available to support expansion of innovative practice e.g. Pharmacy prescribers in service
Creation of Step In services across Aberdeenshire	By 31/3/2023	1 up and running with further 4 progressing	Premises and delays pending clarity about available funding
Comment / remedial action required			

The above actions have been completed and has allowed the achievement in Q 2 and Q3 and substantial improvement in Q4 as the Step-In process started.

Substance Use Treatment Target

Please complete this section only if you did not achieve your quarterly projections to deliver the Substance Use Treatment Target by 2024

	Projection	Performance
Q1 Performance:		
Q2 Performance:		
Q3 Performance:		
Q4 Performance:		

Key actions to improve performance	Timescales to complete	Progress in period	Risks
Comment / remedial action required			