#### The Quality Principles: Alcohol & Drug Partnership (ADP) Validated Self-Assessment and Improvement Perth and Kinross

#### Introduction

To support effective implementation of the Quality Principles, the Scottish Government commissioned the Care Inspectorate to undertake a programme of validated self-evaluation across Alcohol and Drug Partnerships (ADPs) in Scotland. The aim of the project was to provide an evidence-informed assessment of local implementation, measurement and quality assurance of ADP and service compliance with *The Quality Principles: Standard Expectations of Care and Support in Drug & Alcohol Services*.

To find this out we gathered the views of staff across services providing treatment, care and support and from individuals accessing drug and alcohol services. We carried out two online surveys in January and February 2016, aimed at gathering both the views of staff and users of services in relation to each of the Quality Principles. The staff survey was completed by 158 staff members and the service user survey was completed by 53 individuals.

We read the files of 10 individuals who received treatment and support from health, statutory and third sector services delivering drug and alcohol services. We met with six individuals receiving services to listen to their views about their experiences of services. We also spoke to 21 staff in these services who work directly with individuals and to members of the Alcohol and Drugs Partnership responsible for strategic planning. We are very grateful to everyone who talked to us as part of this validated self-evaluation process.

The Care Inspectorate validation team was made up of a Strategic Inspector working with an Associate Assessor with knowledge and practice experience in alcohol and drugs services and support from staff from the Scottish Drugs Forum, National Quality Development team.

In the course of the validated self-evaluation process we identified a number of particular strengths which were making a positive difference for individuals and families as well as areas for improvement. These are identified in the feedback summary.

# 1. Key performance outcomes

### Quality Principle 1.

You should be able to quickly access the right kind of drug and alcohol service that keeps you safe and supports you throughout your recovery.

#### Strengths

- The Perth and Kinross ADP had exceeded the three week referral to treatment HEAT target consistently over a number of years indicating that they were delivering effective access to services for individuals who required support.
- The ADP had recently augmented its joint working arrangements to develop a formal weekly triage system involving health, social work and third sector representatives to effectively screen and allocate all referrals in to services.
- The ADP had piloted the Recovery Outcome Web (ROW) and undertaken scoping activity including development days to prepare for the wider introduction of both the ROW and DAISy across all services.
- The intelligence analyst role had strengthened compliance with the HEAT targets by ensuring that services reported data which was interrogated and benchmarked and that area for improvement were focussed on where necessary.

#### Areas for improvement

 Whilst there was very good systems in place to deliver on the waiting time HEAT targets, both the case file and survey analysis results highlighted that this did not always match up with individuals experiences. The ADP would benefit from further evaluation of this issue to ensure a more congruent outcome for all stakeholders.

### 2. Getting help at the right time

#### Quality Principle 2.

You should be offered high quality, evidence-informed treatment, care and support interventions which keep you safe and empower you in your recovery.

#### Strengths

- It was evident from the staff and service user survey results, focus groups and case file reading that service users were offered high quality, evidence informed treatment, care and support interventions.
- The Roots to Recovery Service funded by the Integrated Care Fund was impressive. It had produced up to 30 case samples of interventions they had undertaken to date and had been well evaluated. They were working very closely with the homeless service outreach team and providing very good interventions for individuals who were difficult to reach and in crisis.
- Both the survey and case file reading analysis suggested that there was good access to harm reduction services. This was also the findings from our focus group meetings with staff, although, the message from service users was much more mixed. New psychoactive substances (NPS) and naloxone awareness and training had widespread availability and the harm reduction

nurse was positively reinforcing this work. Core services were thought to do good harm reduction work while most felt that the further away from the centre you got, the less services knew about the approach.

### Areas for improvement

- Whilst both the self-evaluation and staff felt that consent was built in to key operational processes and kept under review, the survey and case file reading analysis would suggest this should remain an area of focus for the ADP.
- Overall, the service users in the focus group were positive about services but there were many strong opinions voiced about how difficult it was to access NHS Addiction Services assessment pathways for ORT's. The ADP would benefit from reviewing their prescribing pathways, including GP's and assess whether this reflects a wider view of service users' experiences.
- None of the service users in the focus group said they knew about the current single point of access arrangements which needs addressed to maximise accessibility.
- There was very mixed views about in-patient detox services being reduced to one week for alcohol and after care support. The ADP needs to address the stark contrast we found between staff and service users about aftercare and post discharge support.

### 3. Impact on staff

#### **Quality Principle 3.**

You should be supported by workers that have the right attitudes, values training and supervision throughout your recovery journey.

#### Strengths

- Almost all of the service user's completing the survey said that workers had the right attitude, values and worked in a supportive way. Most, but not all the focus group agreed.
- Almost all the staff we met and who responded to the staff survey said they felt well supported by their manager which was important in the context of the complex environment in which they work.
- The ADP had positively implemented Sainsbury Recovery Model to support individual service self-evaluation and they were reporting on quality aspects to the ADP executive group through an agreed reporting schedule.
- Both the case file reading and survey analysis suggested that the high majority of workers were encouraging individuals' to connect with wider community support groups which were important to their longer term wellbeing.

#### Areas for improvement

• Specialist trauma services were available in mental health services and accessible through joint integrated referral pathways. There were services for children who needed them. Whilst this was positive, our focus group highlighted that the extent of frontline staffs knowledge, skills and awareness was not consistent across services and capacity for specialist services was

often limited due to vacancies in key posts. The ADP needs to continue building on the good foundation they have laid to close any gaps in provision.

• Some service users in the focus group expressed frustration about having appointments with nurses with a background in alcohol services when they were presenting with drug related issues and vice a versa. The ADP could benefit from exploring the impact of this more fully.

# 4. Impact on the community

#### Strengths

- The appointment of the Wellbeing and Recovery Project Manager to oversee (the project work around the Recovery Orientated System of Care (ROSC) had delivered a number of key objectives relating to community capacity building. In particular, the Wellbeing Fair work was particularly impressive.
- The benefits of the Social Prescribing Project are discussed further in the 'Good Example' section of this feedback summary.
- There was good evidence that the ADP had laid strong foundations in terms of their community work including their ROSC activity, mutual aid, whole population approach, NPS/naloxone strategies and had strong links to other thematic groups.

#### Areas for improvement

- There was a lack of clarity around the permanency of the resources committed to the above projects and the ADP should continue their work to ensure projects of this nature are designed to be sustainable in the longer term.
- Whilst all of the service users attending our focus group were generally sitive about their experiences of services, none of them said they knew about the Quality Principles. The ADP needs to ensure that all its stakeholders know and understand how these shape their experiences working in addiction services
- The staff survey suggests that the ADP needs to demonstrate more effectively to staff how it is improving the quality of people's lives in the wider community so they can more clearly understand the wider benefits of the roles they undertake.

### 5. Delivery of key processes

#### **Quality Principle 4.**

You should be involved in a strength based assessment that demonstrates the choice of recovery model and therapy is based on your needs and aspirations.

# Quality Principle 5.

You should have a recovery plan that is person-centred and addresses your broader health, care and social needs, and maintains a focus on safety throughout your recovery journey.

### Quality Principle 6.

You should be involved in regular reviews of your recovery plan to demonstrate it continues to meet your needs and aspirations.

### Quality Principle 7.

You should have the opportunity to be involved in an ongoing review of how services are delivered throughout your recovery. **Quality Principle 8.** Services should be family inclusive as part of their practice.

# Strengths

- Almost all of service users completing the survey said their recovery plan felt personal to them and was achieved in partnership with staff. This was also reflected in the service user focus groups. In most cases, these were up to date and visible in the case files reflecting sound front line working practices.
- Feedback from staff and service users we met suggested that there was a developing approach to strength based practice. This needs to continue being consolidated.
- There was a positive and distinct shift of strategic policy direction and investment from the ADP, supported by all sectors, away from traditional treatment services and towards a whole family approach. Whilst service users we met in focus groups, as well as those completing the survey, experienced this, case file reading analysis indicated that there is the potential to further strengthen this approach in key processes.

# Areas for improvement

- From our case file analysis we found that the majority of recovery plans identified agreed outcomes, however, only a few recovery plans were SMART. While staff we met in focus groups gave us examples of where this is developing across individual services, the ADP still had more work to do in this area.
- There were assessments, including risk assessments, in the majority of files we looked at. Whilst general assessments were all of an adequate standard and above, improvement was required around the timing and quality of risk assessments.
- Both the survey and case file analysis showed that the ADP needs to continue focussing on ways of providing people with copies of their recovery plans to ensure they are fully involved in their support.
- Whilst the service user survey indicated a high number of individuals felt plans were reviewed to reflect changes, the case file reading analysis suggested the ADP should continue to focus on this being done at intervals appropriate to the individual's needs.
- Despite a lot of evidence of close joint working across the ADP, less than half of the case file analysis showed an appropriate level of partnership working in terms of implementing individual plans which the ADP needs to address.
- The case file and survey analysis would indicate that more work needs to be done by the ADP to highlight the role of Independent Advocacy in order that service users opportunities to self-determination is maximised.

### 6. Policy, service development and planning

### Strengths

• The ADP was developing their governance arrangements within the local and Tayside context in which it operated. Despite the current challenges including

health and social care integration, it had sound mechanisms in place for reporting progress on its delivery plan through both the Integration Joint Board (IJB) and Community Planning Partnership and linked well to other thematic groups.

- There was a strong focus on self-evaluation through the executive group using approaches such as the Sainsbury self-evaluation framework and the Quality Academy, which both embedded the Quality Principles.
- There were a number of targeted needs assessments undertaken such as NPS, mostly completed on a pan Tayside basis. The ADP's position within this work was strong and they were proactively using the findings to commission and invest and reinvest in areas that were beginning to shift the balance of care from treatment to early interventions including the whole family approach.
- The ADP involved service users in the commissioning processes effectively enhancing their involvement in service delivery and planning. It had a traditionally strong outcome focussed approach and linked to the use of alternative funding streams promoting sustainability such as Lloyds TSB Foundation and the Integrated Care Fund.
- The ADP was confident that it was actively involved in joint financial planning processes and that the outcome of this would support their vision for the services both in Perth and Kinross and more widely across Tayside, as the need for closer work across the region was acknowledged

### Areas for improvement

- Whilst the position statement and ADP focus groups we attended confirmed that there were a number of effective engagement strategies in place, both the service user survey and focus group highlighted that some individuals remained unclear about how their views routinely shaped service delivery. The ADP would benefit from having a more systematic approach to service user feedback (You Said, We Did).
- The ADP needed to refresh its commissioning plan so it was in line with the (JJB's strategic plan, recent needs analysis activity and clear focus on early interventions. This is to ensure it is consistent with the needs of the population and ADP vision.

### 7. Management and support of staff

#### **Quality Principle 3.**

You should be supported by workers that have the right attitudes, values training and supervision throughout your recovery journey.

#### Strengths

• The staff survey indicated that the majority of staff received an annual appraisal or performance review in the last year which showed the ADP was supporting personal and professional development for staff.

#### Areas for improvement

 Both the staff survey and focus group we attended reflected positive feedback from staff about feeling well supported and regularly receiving feedback on the quality of their work. Whilst this was positive, it was evident in only a few case files we read. Consideration on how to better reflect this support and feedback within case notes needs to be undertaken.

- The staff survey indicated that the ADP needs to continue supporting new staff to undertake induction and workforce development opportunities to ensure they have the knowledge and skills to work in a complex area.
- Whilst there had been good workforce development foundation work undertaken jointly between the ADP, other Tayside ADP's and the Scottish Drugs Forum, the learning, training and development group needs to further develop a SMART delivery and implementation plan aligned to the ROSC...

### 8. Partnership working and resources

# Strengths

- There was evidence that there was effective collaboration with all stakeholders and across all sectors. There were joint operating procedures, performance reporting, governance as well as strategic planning and delivery arrangements.
- There were strong working relationships developing with all the other appropriate thematic groups such as Child Protection Committee, Adult Protection Committee, children and families and other public protection agendas. In addition, the ROSC, mutual aid and whole population work were also firmly rooted in strong partnership arrangements.
- The co-location of the statutory services at Highland House in Perth was consolidating the above. Staff felt that multi-agency working had really been embedded since this model was introduced. Staff felt the multi-agency single point of access and drop in centre at Highland House was helping to diminish perceptual differences amongst staff.

# Areas for improvement

- The ADP was working with its stakeholders to determine the future delivery model of their existing social work services but there was much uncertainty amongst all staff groups about this. The ADP needed to ensure frontline staff were kept abreast of developments including jointly agreed plans and timescales for change.
- Whilst the ADP had progressed well with co-location and joint delivery models, many of these services were delivered from a single point in Perth.
  Work remained to be done to determine how these existing statutory services will be jointly deployed more widely across localities.
- Both the staff and service users we met highlighted that the ADP would benefit from developing their joint processes, for example, shared assessments, outcome tools, and recovery plans to avoid areas of duplication.

### 9. Leadership and direction

### Strengths

• The ADP was consistently meeting and exceeding key performance targets, indicating that they were successfully delivering accessible services.

- Our focus group with the ADP chair and its members confirmed that there was effective communication around the challenges and that all stakeholder agencies felt well informed.
- The ADP was collaborative, transparent, had robust governance in place, with sound strategic planning and delivery arrangements and established working relationships with all the other necessary strategic groups.
- The ADP had evidenced a high level of innovation, commitment to selfevaluation and ongoing improvement; this culture was well supported and encouraged by the leaders we met.
- The ADP benefited from a culture within services where the majority of staff felt motivated, supported by their manager and evidenced person-centred approaches to their work. All of this was positive given the context of the demanding working environment they operated within.

# Areas for improvement

- Whilst ADP members felt positive about understanding the vision for the ADP, both the staff survey analysis and focus group suggested there is more work to be done to both communicate and involve staff in future service development.
- There was a strong emphasis on partnership working amongst services. Whilst this was positive, the redesign of the social work services was causing significant uncertainty and the ADP, along with its partner organisations, needed to make sure that all stakeholders were fully involved in consultations about any new joint service delivery models.

### Examples of good practice

As part of the validated self-evaluation process, we asked partners to nominate some examples of good practice which can be shown to have a positive impact on the lives of individuals, families and communities. During the onsite visit we assessed these examples to identify those which we consider would be useful to other alcohol and drugs partnerships across Scotland.

• <u>The Social Prescribing Project.</u> The Social Prescribing Project was a sound and well integrated approach that featured an appointed lead officer who had collaborated closely with a large number of stakeholders and local communities to raise awareness of addiction issues, develop mutual aid and a range of sustainable support networks. The project had also developed an evaluation framework in order to measure the positive impact the work had on communities and had demonstrated a range of positive results to date. There was good evidence that this project had strengthening community capacity across Perth and Kinross.