

Integration Joint Board  
Clinical and Care Governance Committee

15<sup>th</sup> August 2019

This Report relates to  
Item 5 on the Agenda

# Alcohol and Drug Partnership Performance Report

*(Paper presented by Grahame Clark)*

*For Discussion and Noting*

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<b>List of Background Papers</b>	Not Required
<b>Appendices</b>	Not Required

## SECTION 1: REPORT CONTENT

**Title/Subject:** Alcohol and Drug Partnership Performance Report

**Meeting:** IJB Clinical and Care Governance Committee

**Date:** 15<sup>th</sup> August 2019

**Submitted By:** Grahame Clarke

**Action:** For Discussion and Noting

### 1. Introduction

- 1.1 All Alcohol and Drug Partnerships (ADP) are accountable to their local Integration Joint Board (IJB) and we are required to ensure that the IJB have oversight of the workstreams and plans being progressed.
- 1.2 The following report shows the performance of three specific areas that are monitored and progressed by Dumfries and Galloway Alcohol and Drug Partnership (ADP).

### 2. Recommendations

- 2.1 **The Clinical and Care Governance Committee is asked to discuss and note:**
  - **The ongoing achievement of the Local Delivery Plan (LDP) standard for waiting times for drug and alcohol recovery services.**
  - **The ongoing challenge and actions to meet the LDP standard for Alcohol Brief Interventions (ABIs)**
  - **The ongoing challenge and proposals to reduce drug deaths**

### 3. Background

- 3.1 Dumfries and Galloway Alcohol and Drug Partnership is a multi agency partnership funded by the Scottish Government to deliver alcohol and drug prevention, treatment and recovery initiatives and services across Dumfries and Galloway. Performance measurements are based on ministerial priorities, local priorities and NHS LDP standards.

### 4. Main Body of the Report

#### 4.1 Summary

This Report provides an update on selected performance targets of the Dumfries and Galloway Alcohol and Drug Partnership (ADP) for the financial year April 2018 to March 2019. It also highlights aspects of work that is ongoing to improve performance to meet these targets across Dumfries and Galloway.

- Waiting times – service users waiting less than 3 weeks for treatment decreased from 97% to 95% (LDP target 90%)
- Alcohol Brief Interventions (ABIs) – 5402 screenings undertaken, 1071 ABIs completed (LDP target 1743)
- Drug Deaths – 20 – no set target

#### 4.2 Introduction

This Report provides an update on 3 main workstreams for alcohol and drugs for the financial year April 2018 to March 2019. Data for this report has been drawn from the following sources:

- Waiting Times – National Waiting Times Database (SDMD)
- ABI figures – Information Services Division
- Drug Deaths – National Records of Scotland

Comparisons with the 2017-18 year have been provided and an indication of national trends or figures has also been shown.

#### 4.3 Waiting Time Referrals

ADP National Outcome – Health states “People are healthier and experience fewer risks as a result of alcohol and drug use” and links in with National Health and Wellbeing Outcome 1 – “People are able to look after and improve their own health and wellbeing and live in good health for longer”.

Quick access to services is important in engaging individuals in treatment and recovery, enabling them to improve their overall health and wellbeing.

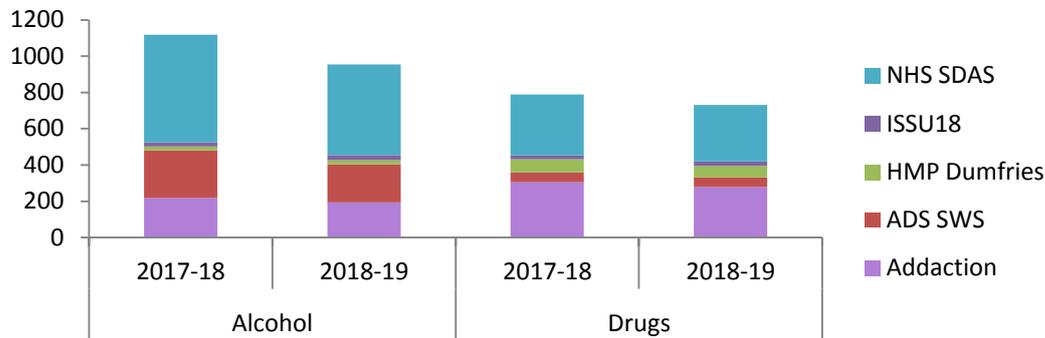
Waiting Times for individuals starting treatment within 3 weeks of referral to an alcohol and drug service is a NHS Local Delivery Plan (LDP) target; *90% of individuals start appropriate treatment for their drug/alcohol problem within 3 weeks of referral.*

Dumfries and Galloway ADP are tasked with ensuring that statutory and non statutory alcohol and drug services, as well as other wider health and justice settings, contribute to and aim to achieve this target on a quarterly basis.

Between 2017-18 and 2018-19, there was an 11.6% reduction in referrals to alcohol and drug services, from 1,907 to 1,686. Figure 1 compares the

number of referrals by year and splits these by service and type of referral.

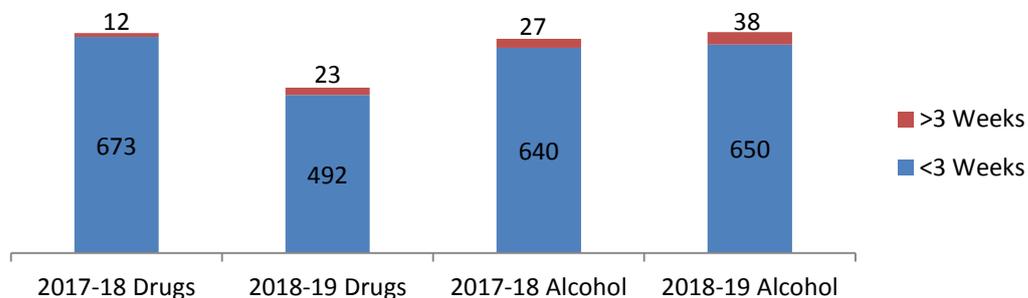
Figure 1: Alcohol and drugs waiting time referrals by year and service



The number of completed waits reduced by 11% (n=149) between 2017-18 and 2018-19, see figure 2. The number of clients waiting more than 3 weeks increased from 39 to 61 with only eight clients waiting more than 5 weeks.

Due to pressures on staffing within the NHS Specialist Drug and Alcohol Service, overall compliance with the 3 week waiting time target fell from 97% in 2017-18 to 95% in 2018-19. This is still within the overall NHS Local Delivery Plan Waiting Times target of 90%.

Figure 2: Waiting times 3 week target comparison



A new national database for recording alcohol and drug waiting times and treatment profiles of drug and alcohol users (DAISy) will replace the SDMD waiting times database. This is due to be rolled out towards the end of 2019. The ADP Performance Officer is taking an active role in the national DAISy implementation group and will ensure that training is provided to relevant services when appropriate.

#### 4.4 Alcohol Brief Interventions (ABIs)

ADP National Outcome – Health states “People are healthier and experience fewer risks as a result of alcohol and drug use” and links in with National Health and Wellbeing Outcome 1 – “People are able to look after and improve their own health and wellbeing and live in good health for longer”

Screening individuals around their alcohol use provides an opportunity to identify those who are putting their health at risk by drinking hazardously and harmfully. Conducting an ABI provides a means to raise awareness with the individual around their drinking habits and in turn help them to consider reducing their alcohol intake.

Alcohol Brief Interventions are an NHS LDP target. NHS Dumfries and Galloway is expected to deliver 1743 ABIs annually, 80% of which are expected to be in the priority settings of Accident and Emergency, Primary Care and Antenatal. The remaining 20% can come from wider settings such as Occupational Health, Prison and Quit Your Way. For the third year in a row, this target was not achieved, despite an increase in the number of ABIs delivered from the previous year.

Progress:

There has been a targeted effort to engage a variety of health professionals to be trained to deliver ABIs but this to date is still a challenge for the ADP.

Progress is underway with a small pool of staff who have agreed to become local trainers. Once trained, they will offer ABI training to a range of local organisations and agencies.

Primary Mental Health Nurses are being recruited to each GP practice as part of the Primary Care Transformation Fund. The workload will include Alcohol Screening and ABIs.

A meeting has been arranged with Practice Managers to raise the issue of ABI recording within practices and to link in with the Primary Mental Health Nurses.

The ADP Support Team has also continued to work with services to ensure that staff are trained in conducting an ABI and that completed ABIs are reported.

**Figure 3** shows that the number of screenings recorded has increased by 62% from 3333 in 2016-17 to 54002 in 2018-19. Despite the number of screenings increasing, **Figure 4** shows that 1071 ABIs were completed in 2018-19, 34 less than 2017-18.

Figure 3: Alcohol screenings by setting

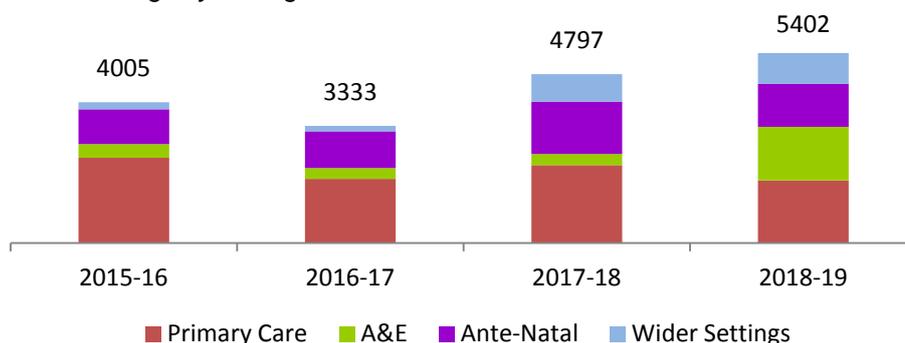
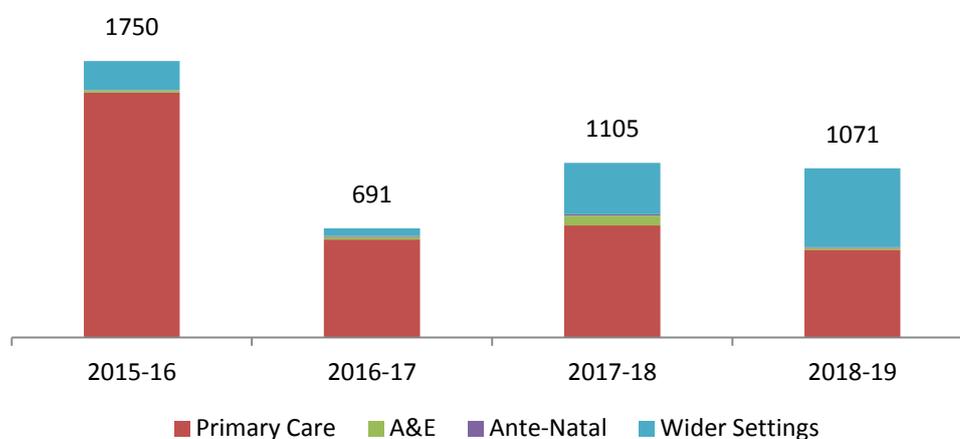


Figure 4: Alcohol Brief Interventions by setting



#### 4.5 Drug Deaths

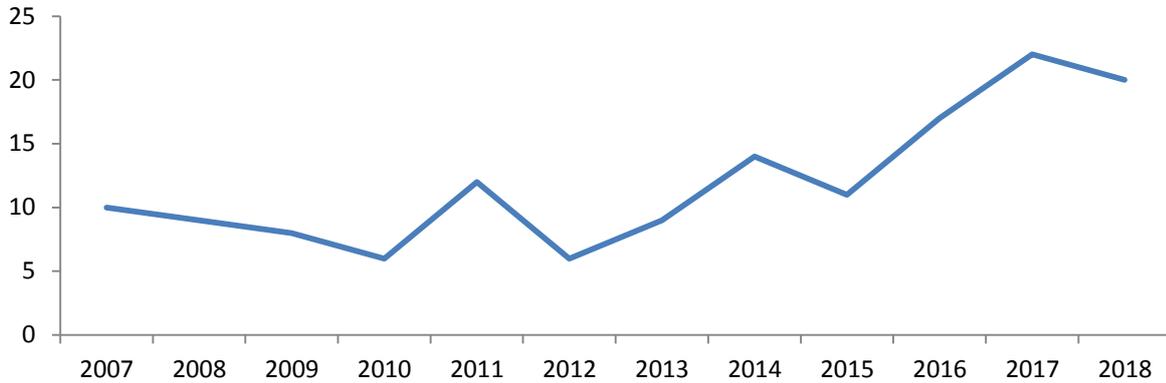
ADP National Outcome – Recovery states “individuals are improving their health, wellbeing and life chances by recovering from problematic drug and alcohol use” and links in with National Health and Wellbeing Outcome 4 – “Health and social care services are centred on helping to maintain or improve the quality of life of people who use their services”

Engaging individuals in treatment services is a known protective factor in reducing the risk of dying from a drug related death.

Official figures from National Records of Scotland (NRS) for drug deaths in Dumfries and Galloway in 2018 shows a slight reduction from 22 deaths in 2017 to 20 deaths in 2018. This is still the second highest recorded number of drug deaths in Dumfries and Galloway.

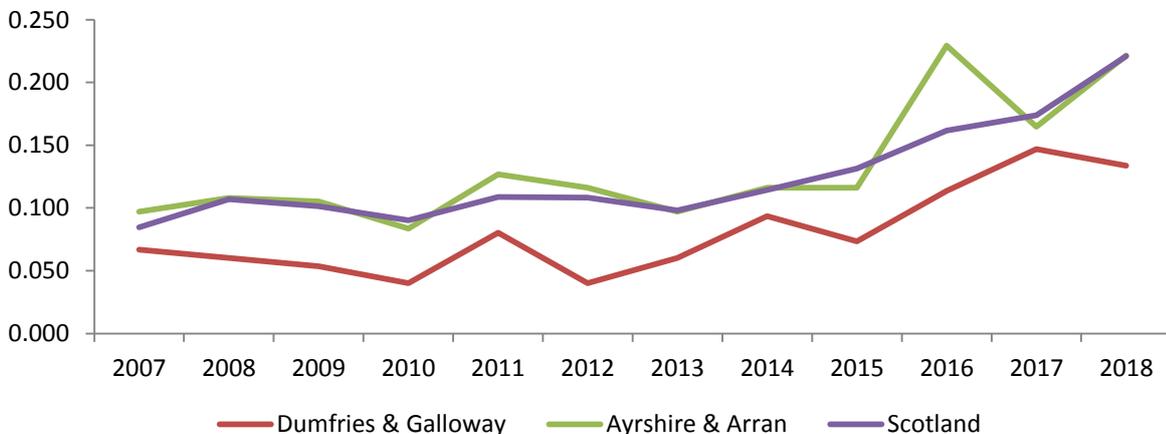
**Figure 5** shows the number of drug deaths in Dumfries and Galloway up to the end of 2018

Figure 5



**Figure 6** compares the rate of drug deaths per 1000 of population for Dumfries and Galloway and the whole of Scotland. This shows that the number of deaths per 1000 population of Dumfries and Galloway is lower (0.13) than Scotland as a whole (0.22). This also shows that the increase in drug deaths in Dumfries and Galloway follows a national trend. As a regional comparison, the rate of drug deaths per 1000 population for Ayrshire and Arran (0.22), which has a similar mix of rural and urban areas, has also been shown.

Figure 6 Drug deaths per 1000 population



Fourteen of the deceased were male and eight female. Older drug users (over the age of 35) accounted for 12 of the 20 deaths. Half of the deceased (10) were in treatment at time of death with 8 of these over 35 years old.

Dumfries and Galloway's Drug Related Deaths Group meets on a quarterly basis to review suspected drug death cases, to identify actions to reduce further deaths and to use information gathered from this to identify future strategy. Actions taken as a result of the group include alerting Ps to prescription drugs that are being found in the cause of

death, highlighting issues with methadone scripts whilst individuals are in hospital and notification procedures for pharmacies that dispense methadone.

The Drug Related Deaths Group has identified that there is a need to examine cases of non fatal overdoses for individuals who are putting themselves at risk of death, by repeatedly overdosing. Work is underway to set up a non-fatal overdose group to identify these high risk suspects and to take proactive action with regard to Naloxone provision and engaging individuals in treatment services. An Information Sharing Protocol has been developed and is waiting for sign off by partner organisations.

Further discussions will take place with drug and alcohol treatment and recovery services to look at the needs of older drug users in treatment and how to engage with problem drug users not in treatment.

*Naloxone Provision:*

The Naloxone programme has been established in Dumfries and Galloway for 8 years, Naloxone is a drug that temporarily reverses the effect of opiates, allowing time for someone to seek emergency help. Individuals such as drug users, their families, friends/carers are trained in overdose awareness, first aid and CPR before being supplied with a Naloxone kit.

In 2017-18, the total number of Naloxone kits supplied increased by 48% (n=101) from 210 to 311 in 2018-19. The numbers of first, repeat and spare supplies are shown on **Table 1**.

*Table 1: Naloxone kits supplied by reason for supply and year*

	<b>2017-18</b>		<b>2018-19</b>	
	Count	% of Year	Count	% of Year
First Supply	110	52.4%	123	39.5%
Repeat Supply	88	41.9%	149	47.9%
Spare Supply	12	5.7%	39	12.5%
Grand Total	210	100.0%	311	100.0%

In October – December 2018 there was an initiative to ensure that service workers had a Naloxone kit, increasing the number of first and repeat supplies.

In 2018-19, 149 repeat supply kits were provided. **Table 2** shows that 21% (n=31) of replaced kits had been used on someone who had overdosed.

*Table 2: Naloxone repeat supply kits distributed 2018-19*

<b>Reason</b>	<b>Apr-Jun</b>	<b>Jul-Sep</b>	<b>Oct-Dec</b>	<b>Jan-Mar</b>	<b>Total</b>
Damaged Kit	2	2	4	2	<b>10</b>
Expired	5	6	10	3	<b>24</b>
Lost Kit	14	15	21	13	<b>63</b>
N/A Spare Supply	0	1	2	0	<b>3</b>
Not Known	7	2	2	4	<b>15</b>
Used on Other	6	6	12	7	<b>31</b>
Used on Self	2	0	1	0	<b>3</b>
<b>Grand Total</b>	<b>36</b>	<b>32</b>	<b>52</b>	<b>29</b>	<b>149</b>

#### 4.6 Next Steps

- Dumfries and Galloway ADP is expected to develop a new 3 year strategy by 1st April 2020. The information presented in this report, as well as the Memorandum of Understanding set out by COSLA and the Scottish Government and the National Strategies for Alcohol and Drugs – Rights Respect and Recovery and the Alcohol Framework will inform the development of the strategy.
- A consultation period with stakeholders and service users will be undertaken to ensure that the new strategy encompasses the views of those working in the alcohol and drug field as well as service users, families and carers.
- An ADP Performance Framework will be developed to incorporate the national and local outcomes for ADPs and IJBs.

## 5. Conclusions

- 5.1 ADP continues to meet the Waiting Times target and this is expected to continue and to achieve the target in 2019-20
- 5.2 Achieving the ABI target is an ongoing challenge, however progress is expected to be made in 2019/20 with the planned actions to address this.
- 5.3 Although there was a small decrease in drug deaths, ADP will continue to look at initiatives to reduce further deaths.

## **SECTION 2: COMPLIANCE WITH GOVERNANCE STANDARDS**

### **6. Resource Implications**

6.1. No additional funding is required.

### **7. Impact on Integration Joint Board Outcomes, Priorities and Policy**

7.1. The recommendations contained within this report are in line with the existing ADO National Outcomes and Priorities and with identified local priorities.

7.2. The recommendations are also in line with National Health and Wellbeing Outcomes 1,4,8 and 9.

### **8. Legal & Risk Implications**

8.1. The continued difficulty in delivering the required number of ABIs continues to present an ongoing risk. It is likely that this will be the subject of further scrutiny by the Scottish Government, hence the need to demonstrate that all possible actions are being taken to improve current levels of performance.

### **9. Consultation**

9.1. No consultation is required.

### **10. Equality and Human Rights Impact Assessment**

10.1. An Equality and Human Rights Impact Assessment is not required for this report on performance.

### **11. Glossary**

11.1.	ABI	Alcohol Brief Interventions
	ADP	Alcohol and Drug Partnership
	DRD	Drug Related Deaths
	IJB	Integration Joint Board
	LDP	Local Delivery Plan
	NRS	National Records for Scotland

