

Strategic Commissioning Plan Alcohol and Drug Services 2020-2023

“Increasing wellbeing and reducing health inequalities across all communities in West Lothian”

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1. Introduction

In West Lothian we believe in providing supports and services that allow our citizens to live well. The Alcohol and Drug Services Strategic Commissioning Plan prepared by the West Lothian Alcohol and Drug Partnership (ADP) sets out how the West Lothian Health and Social Care Partnership aims to improve the way in which drug and alcohol services are delivered to people within our population who need our support.

The Public Bodies (Joint Working) (Scotland) Act 2014 requires arrangements to be put in place for the delivery of integrated health and social care. As a result of this we have published the [West Lothian Integration Joint Board Strategic Plan 2019-23](#) setting out both our aims and strategic priorities to achieve this ambitious goal. The vision of the plan is:

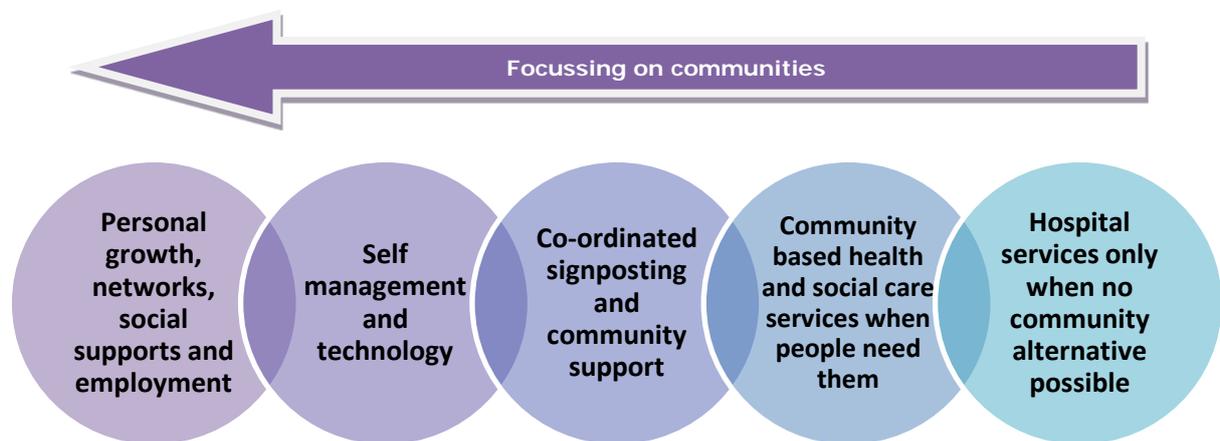
“To increase wellbeing and reduce health inequalities across all communities in West Lothian”

By working to the values of both West Lothian Council and NHS Lothian, the Integration Joint Board (IJB) has developed a set of values that will underpin the future commissioning of the services outlined in this plan.



2. Our Approach

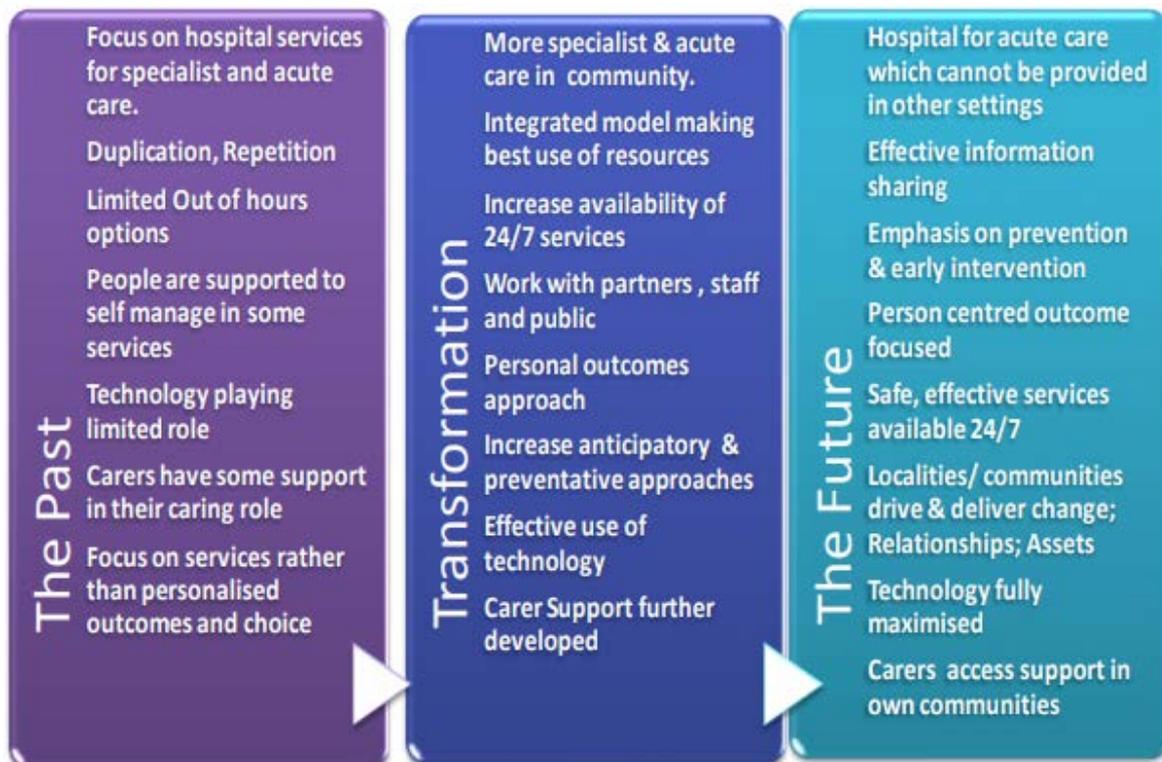
We have adopted a whole system approach to reviewing and developing alcohol and drug services in West Lothian. This means that we are thinking about how we invest our resources; aiming to have fewer people develop problematic drug and alcohol use, providing high quality and effective treatment when needed, recognising that in many instances services work best when they are delivered locally. We are working on the principle of offering health and social care services in community settings unless there is a very good reason not to. We are focussing on how we shift the balance of care towards delivery of care and support at the right time in local communities.



Significant transformational change takes time and we recognise that it may take longer than the span of this plan to achieve all the changes we need. This plan builds on previous work and provides a firm foundation for developing alcohol and drug services for adults in West Lothian over the next three years.

We need to think carefully about how we manage our financial resources and our workforce to deliver new ways of working. It will be necessary to invest in some services and disinvest in others as our plans develop. We also need to build a sustainable workforce to address some of the challenges we face, and focus on maximising opportunities for integrated and partnership working.

The vision for transformational change in Health and Social Care in West Lothian is described in more detail below:



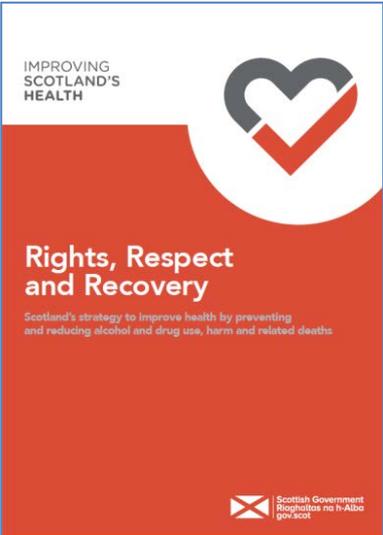
Engagement with local communities provides a key mechanism for ensuring that services are planned and led in a local way. Development of the commissioning plan for alcohol and drug services has involved both targeted and open consultation with service users, carers, families, providers and staff from across the West Lothian Health and Social Care Partnership (WLHSCP). The consultation, along with the recent Health Needs Assessment Substance Use-West Lothian 2019 conducted by NHS Lothian's Department of Public Health and Policy, has enabled us to identify what matters most to those directly affected by problematic drug and alcohol use.

Our approach in West Lothian draws on the priorities outlined in key national drivers such as:

- Rights, Respect and Recovery: alcohol and drug treatment strategy – Scotland's strategy to improve health by preventing and reducing alcohol and drug use, harm and related deaths
- Published Quality Principles which outline the care and support standards expected in drug and alcohol services
- Ministerial priorities and National deliverables
- Recent recommendations of The Drugs Deaths Taskforce

The Scottish Government launched Rights, Respect and Recovery the new strategy in 2018. An action plan covering 2019-2021 was published in October 2019. The strategy provides a vision and a set of guiding principles based on everyone having rights: to health, to be free from harms; to be treated with dignity and respect; and to be fully supported to find their own type of recovery. It aims to make improvements so that: fewer people develop problematic drug use; more people benefit from effective, integrated, person-centred support; children and families are safe, healthy, included and supported; and vulnerable people are diverted from the justice system where appropriate and those within justice settings are fully supported.

The strategy focuses on improving:



- Prevention and early intervention
- Developing recovery orientated systems of care
- Getting it right for children, young people and families
- Public health approach to justice

The Quality Principles: Standard Expectation of Care and Support in Drug and Alcohol Services

The Quality Principles were developed in 2009. The primary purpose of the principles is to ensure that quality is embedded and evidenced across all services in Scotland.

The Quality Principles have been laid out as a journey, beginning with access to services leading on to assessment, recovery planning, and reviews and beyond. No one Quality Principle is more important than another.

1. You should be able to quickly access the right drug or alcohol service that keeps you safe and supports you throughout your recovery.
2. You should be offered high-quality, evidence-informed treatment and care and support interventions which reduce harm and empower you in your recovery.
3. You should be supported by workers who have the right attitudes, values, training and supervision throughout your recovery journey.
4. You should be involved in a full, strength-based assessment that ensures the choice of recovery model and therapy is based on your needs and aspirations.
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 your safety throughout your recovery journey.
6. You should be involved in regular reviews of your recovery plan to ensure it continues to meet your needs and aspirations.
7. You should have the opportunity to be involved in an ongoing evaluation of the delivery of services at each stage of your recovery.
8. Services should be family inclusive as part of their practice.

The Quality Principles are driven forward in West Lothian through the ADP's Quality Assurance Sub Group.

Ministerial Priorities and National Deliverables for 2019/20

Ministerial priorities are updated annually and ADPs are asked to report on progress in their annual reports. The Minister has set out the following five priorities and a series of improvement goals for 2019/20:

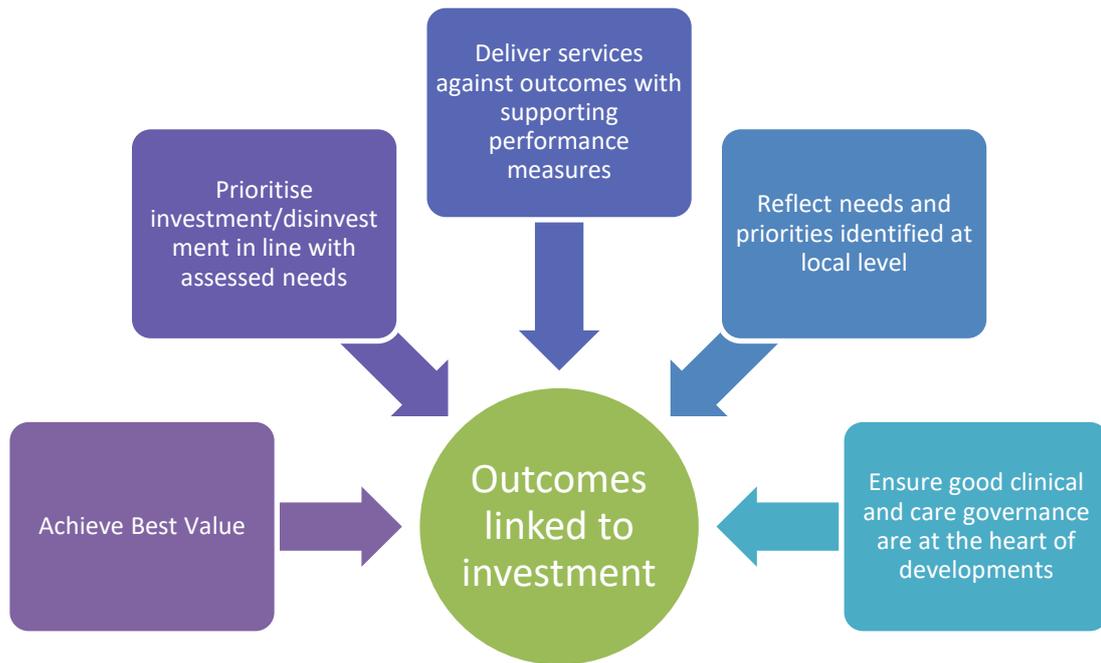
1. A recovery orientated approach which reduces harms and prevents alcohol and drugs deaths;
2. A whole family approach on alcohol and drugs;
3. A public health approach to justice for alcohol and drugs;
4. Education, prevention and early intervention on alcohol and drugs;
5. A reduction in the attractiveness, affordability and availability of alcohol

Drug Deaths Taskforce Recommendations: Our Emergency Response

In January 2020 the Drug Deaths Taskforce announced six evidence-based strategies to help reduce drug-related deaths:

1. Targeted distribution of naloxone;
2. Having an immediate-response pathway for non-fatal overdose;
3. Optimising medication-assisted treatment (MAT);
4. Targeting people most at risk;
5. Optimising public health surveillance; and
6. Ensuring equivalence of support for people in the criminal justice system

The development of new West Lothian Commissioning Plan for Alcohol and Drug Services has been overseen by the Integration Joint Board's (IJB) Strategic Planning Group and the ADP based on a recent Needs Assessment conducted by Public Health 2019. The commissioning plan aims to:



3. Previous Commissioning Plan - Priorities and Key Results

In 2014, independent research was commissioned by the WLHSCP to develop a comprehensive needs assessment upon which the 2015-18 delivery/commissioning plan for alcohol and drugs services was based. NHS Lothian's Public Health service conducted a further needs assessment for the West Lothian ADP which was completed towards the end of 2019. The principles and key measures identified in both those needs assessments continue to provide the basis for our new commissioning plan.

Implementation of the previous plan took place against a backdrop of challenging financial circumstances and budget pressures which were managed by the ADP.

The main work streams for development identified in the previous plan were:



Prevention

During the course of the plan, the ADP worked with a range of stakeholders around the public health impact of the overprovision of licensed premises in West Lothian and continued close ties with Police Scotland colleagues to support the "Best Bar None" initiative administered by Police Scotland to ensure that licensees followed best practice in regard to the five priorities contained within the Licensing Act.

Working in partnership, Fallahill Primary School, West Lothian Council's Education Service and the West Lothian Alcohol and Drug Services (WLDAS) produced a learning resource pack for primary schools. The pack was rolled out to all primary schools in West Lothian along with DVD and interactive lesson plans. Two training sessions took place for primary school teachers, and schools were given additional support to implement the new approach. A secondary school resource was developed in partnership with Police Scotland and 'campus cops' who were in place at the time were trained to deliver a mixture of learning opportunities to young people.

The ADP started a Young People Sub Group in 2018 recognising that young people and prevention were areas that required much more focus across West Lothian.

Early Intervention

One of the key priorities for the ADP was around addressing alcohol and drug consumption across all sectors in society through early identification and intervention with people beginning to develop problems. Work in this area included implementing and supporting the Substance Misuse Policy in Schools.

Support was given for Alcohol Brief Interventions (ABIs) which aim to identify a real or potential alcohol problem and motivate people to do something about it. The work included training for prison staff and those working in primary care. Support was also given to develop the ABI programme in Social Work, Health and the Voluntary Sector. West Lothian has an annual contribution target of 1,987 ABIs. The yearly target of ABIs delivered continues to be met.

In 2016 a counselling service for young people was decommissioned as it was initially considered that these outcomes could be met within existing services. However, after a review and increased ADP funding, a service was recommissioned in 2019 from WLDAS to provide counselling and support to young people.

Tenancy support has continued to be offered to those with mental health and substance misuse focussing on early intervention and preventing loss of housing or other problems significantly worsening as a result of substance use.

Funding continued for the Specialist Alcohol Service which forms part of the Community Addictions Service in West Lothian. This social work service focused on providing care plans to intervene and support people early enough before capacity, mental and physical health deteriorated beyond reparation.

The Needle Exchange Outreach Network (NEON) needle exchange programme, provides injecting equipment, safer injecting advice, naloxone delivery and encouragement and assistance treatment and other supports was delivered as part the NEON bus and pharmacy exchange.

Community Safety

The ADP undertook work with partners on a whole population approach including supporting Police Scotland with their "Campaign Against Violence" which focuses on tackling the problems caused by party houses where alcohol and drugs are a main feature.

An 'over provision statement' on alcohol availability and consumption was developed with partners including Police Scotland.

The partnership supported the "Best Bar None" initiative administered by Police Scotland mentioned above.

The ADP commissioned an Assertive Outreach Service provided by Change, Grow, Live (CGL) to work as a prison in-reach service supporting those liberated from HMP Addiewell and HMP Edinburgh. They also continued the delivery of an ABI programme in partnership with NHS Lothian for people held in custody suites and who had been arrested or charged with alcohol related offences, including violent offending.

Recovery

The development of the building blocks for our Recovery Orientated System of Care (ROSC) included emphasis on easier access to services and a commissioning process which ensured that recovery was at the heart of service delivery. Providers were challenged to review practices and to recognise the value of family inclusive practice.

There are now three main key treatment services: West Lothian Drug and Alcohol Service (WLDAS); Community Addictions Service West Lothian; and Change Grow Live (CGL).

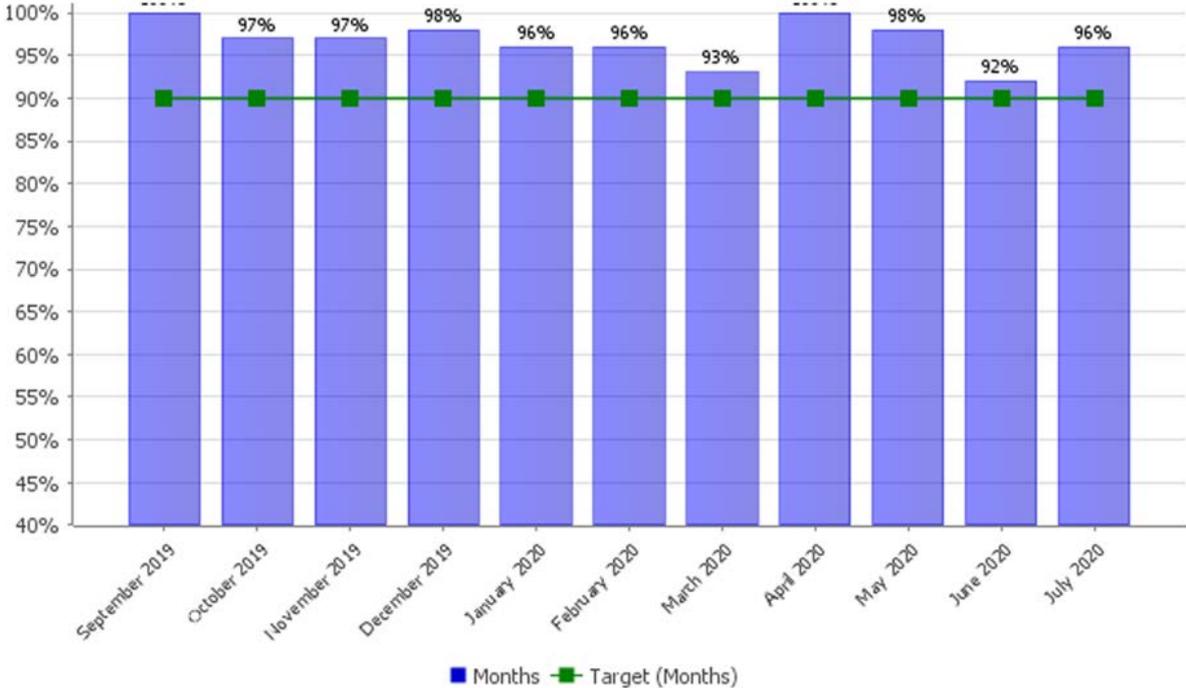
The ADP has a Quality Assurance group which monitors ROSC and Quality Principles to achieve excellence.

West Lothian had a growing recovery community with a number of active mutual aid groups which meet on a regular basis. All ADP commissioned services are encouraged to support service users to attend mutual aid groups and engagement opportunities.

A West Lothian Recovery Service was piloted and evaluated as part of a Public Social Partnership (PSP). Ongoing services were commissioned from Change, Grow, Live (CGL). The work has resulted in more recovery sites being opened, the development of peer support networks and workforce training.

Challenges were experienced during the course of the plan in meeting national treatment waiting time standards, specifically the A11 standard which stipulates that '90% of people who need help with their drug or alcohol problem will wait no longer than three weeks for treatment'. In spring 2019 a recovery plan was put in place which resulted in considerable improvement in performance and the target met in June 2019. Improved performance has been sustained during the course of 2020.

Percentage of clients waiting no longer than three weeks from referral to appropriate drug or alcohol treatment September 2019 to July 2020



- September 2019 and April 2020 had a result of 100%.

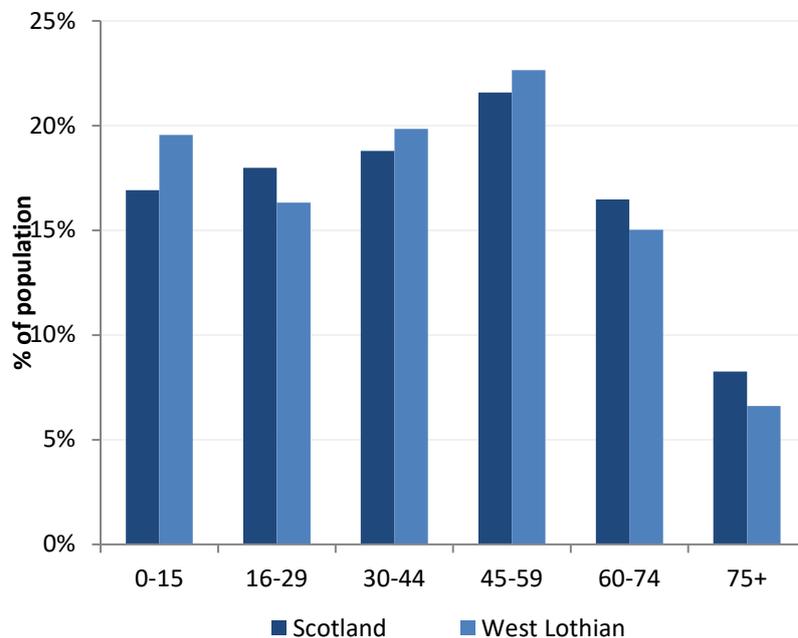
Housing First

The ADP has worked with housing colleagues to develop a 'Housing First' approach. Housing First is a response for people whose homelessness is experienced alongside other severe disadvantage. While the experience of everyone is different, the common threads include trauma, abuse, addictions, mental ill health and experience of local authority care and prison. A Public Social Partnership (PSP) approach to developing the West Lothian model was progressed in late 2019 for those with addictions and mental health problems. Cyrenians have stepped forward to be the lead provider and the aim is to support 10 people by the end of March 2021.

4. West Lothian Context

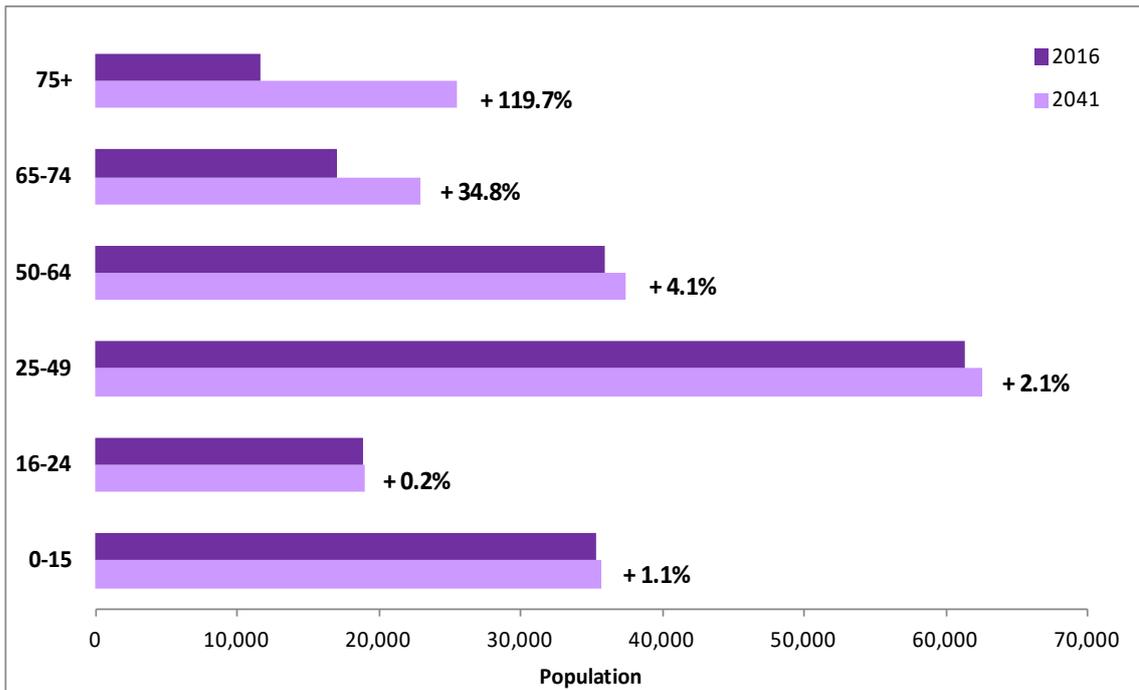
According to National Records of Scotland, the 2017 population for West Lothian was 181,310; a 3.5% increase of the population figures reported in 2011 Census (175,118). In relation to the comparison areas, mid-year estimates for 2017 show West Lothian has a higher population than Falkirk (160,130) and Renfrewshire (176,830), and lower than South Lanarkshire (318,170). Scotland's overall population is also shown (5,424,800).

In terms of age, the West Lothian the West Lothian population is broken down below.



We also know that the West Lothian population is growing at a faster rate than in other areas of Scotland. By 2041, very significant growth is expected in the number of people in West Lothian who will be aged over 65 which will present challenges in how we deliver future services. We already know that we have an ageing workforce in health and social care therefore we need to think very differently about how we will ensure that care and support services are sustainable in the longer term.

The table below shows the expected population shift in West Lothian by 2041



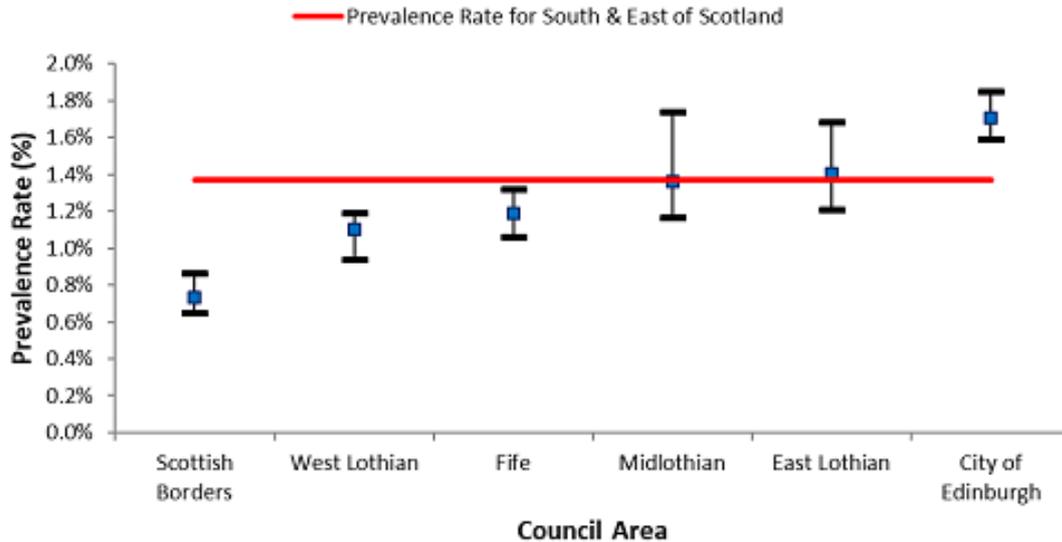
The data below provides some insight into problematic substance use in West Lothian. More detailed analysis is in the Health Needs Assessment 2019 from which the data is extracted:

Problem drug use is defined as *"problematic use of opioids (including illicit and prescribed methadone use) and/or the illicit use of benzodiazepines, and implies routine and prolonged use as oppose to recreational and occasional drug use"* (ISD Scotland, 2019).

There were an estimated 1,300 problem drug users aged 16 to 65 in West Lothian during 2015/16¹ which equates to approximately 1.11% of that population.

The following table shows drug use prevalence rates for the South and East of Scotland with prevalence in West Lothian below the rate across the area as a whole. The ratio of males to females was 2.25 which is similar to the prevalence rate by gender for Scotland. Combined the six councils making up the South and East Scotland area make up 25.3% of the overall Scottish drug prevalence rates.

¹ The most up to date information available



The Drug and Alcohol Treatment Waiting Times (DATWT) database is used to record the number of people receiving treatment in commissioned tier 3 and tier 4 community-based services. Tier 3 interventions include structured, care-planned drug treatment. Tier 4 interventions include drug specialist inpatient treatment and residential rehabilitation.

In 2017, there were 789 referrals to treatment services related to drug misuse and 701 related to alcohol misuse. A more detailed analysis and overview of the drug and alcohol issues in West Lothian are contained in the [Needs Assessment](#) completed in 2019.

National Records of Scotland statistics show the number of drug related deaths in West Lothian for 2018 was 25 which was an increase of 3 from 2017.

A new definition of alcohol deaths was introduced in 2017 for reporting purposes. The new statistics report on conditions wholly attributable to alcohol (where alcohol was the underlying cause on the death certificate). In 2018, in the West Lothian local authority area, there were 35 alcohol-related deaths using the new definition, a decrease from 38 deaths in 2017. The 5-year average covering the period 2014- 2018 is 31.

5. Developing the Strategic Commissioning Plan for 2020 -2023

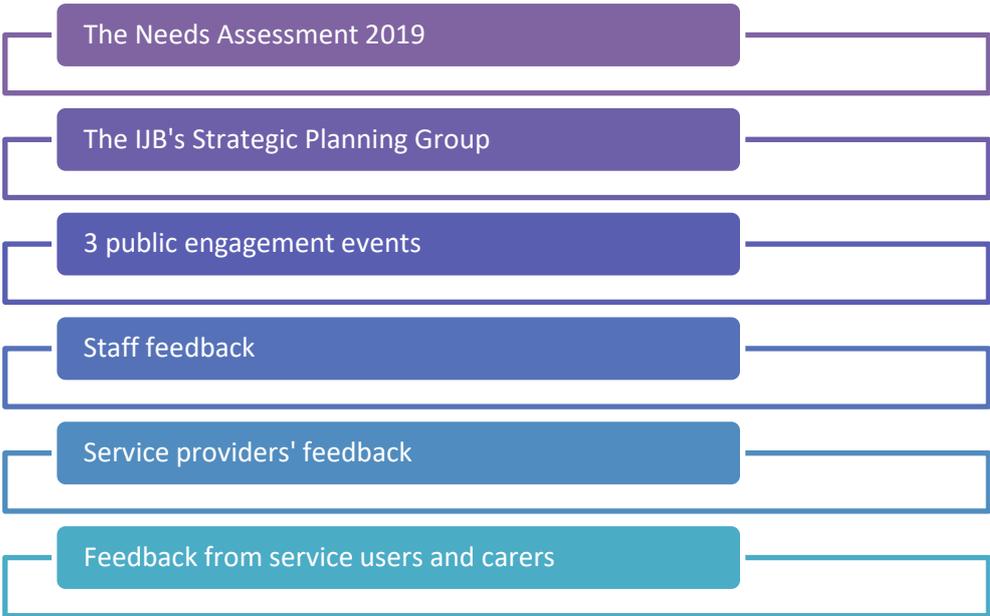
Strategic commissioning is the term used for all the activities involved in assessing and forecasting needs, linking investment to agreed desired outcomes, considering options, planning the nature, range and quality of future services and working in partnership to put these in place. Commissioning is commonly described as a cycle of strategic activities similar to that shown below:



In this model, based on that developed by the Institute of Public Care (IPC), the commissioning cycle (the outer circle) drives purchasing and contracting activities (the inner circle), and these in turn inform the ongoing development of strategic commissioning. We consider commissioning to encompass all the services required to support the health and social care needs of the West Lothian population: health services in the hospital and community, social work and social care services as well as services delivered by the third and independent sectors.

6. Consultation and Engagement

The engagement process for the Alcohol and Drugs Services Plan started as part of the Needs Assessment which commenced in 2018. Consultation comprised a range of approaches and stakeholder involvement including:



Methods for consultation and engagement as part the [Needs Assessment](#) are detailed in the report.

Service users, families, and staff also had the opportunity to engage with the development of the commissioning plan in a range of other ways. Work included focus groups with two different family support groups and a further focus group of service users in the Recovery Service.

In February 2020, 3 customer engagement events took place in 3 different locations in West Lothian. A total of 21 service users, carers and members of the public attended and discussions took place on what was working well in the current system, what could be done better, and what services might be commissioned in the future to improve provision. Specific questions were also asked in relation drug and alcohol related deaths. Two services submitted written submissions from service users to feed into the process.

Engagement with staff groups in the completion of the Needs Assessment included an online survey which generated 70 responses. Meetings were held with individual staff and staff teams to hear about their experiences of

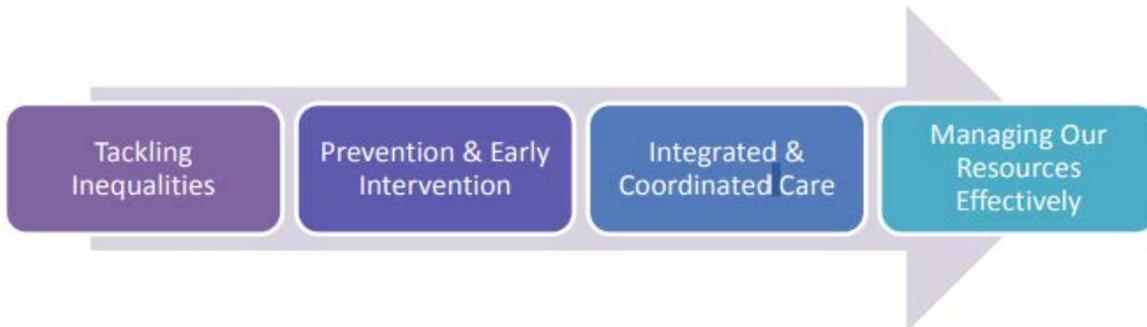
delivering services. On the 5th March 2020 a staff event was held across the ADP which enabled staff to comment on an early draft of this document and provide their views on services that might be commissioned in the future.

Feedback from the Needs Assessment and the stakeholder engagement events was analysed with the following key themes emerging:



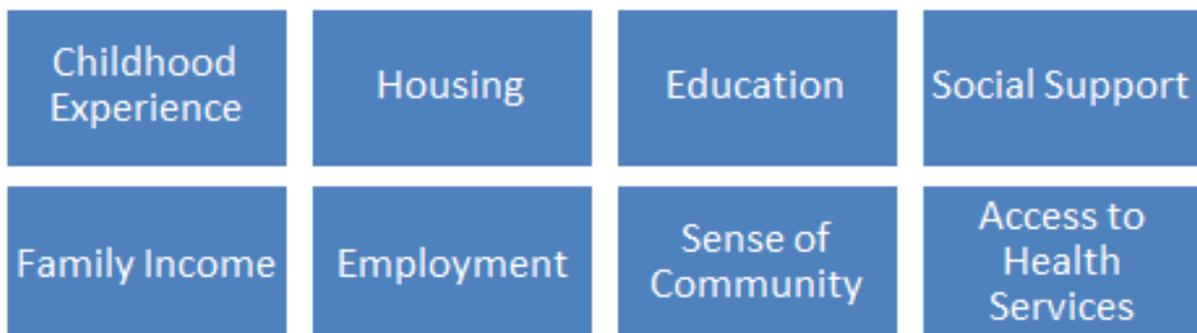
7. Our Strategic Priorities

Achieving sustainable health and social care systems and improving health and wellbeing outcomes in West Lothian requires transformational change over time. The Integration Joint Board's Strategic Plan 2019 to 2023 identifies four strategic priorities for service development:



Tackling Inequalities

We recognise that addressing both health and social inequalities within our communities must be at the heart of our commissioning plans. Social circumstances such as those outlined below can impact our health and wellbeing:



Deprivation plays a significant part in how well we live. People living in some communities are more likely to be living in poorer health and to die younger with higher rates of cancer, stroke, diabetes and heart disease. People with disabilities are more likely to have lower educational achievements, higher rates of poverty and poorer health outcomes. Unpaid or family carers are more likely to have poorer health than the general population which can impact people achieving their own personal outcomes and goals.

We will work with our partners to reduce the impacts of social circumstances on health through:

- ❖ Ensuring services are accessible to all based on need, and barriers to care are addressed
- ❖ Prioritising prevention, primary and community services to maximise benefit to the most disadvantaged groups
- ❖ Supporting services and initiatives to reduce the impacts of inequalities on health and well being
- ❖ Working with community planning partners to address underlying social inequalities that result in health inequalities
- ❖ Offering income maximisation assistance to families and access to specialist benefits and money advice

Prevention and Early Intervention

West Lothian's population is changing. Based on projected demographics we know that we must deliver our services in different ways and must focus on early intervention. A strong focus in this plan will be on delivering our aim of fewer people developing problematic alcohol and drug use. Approaches will centre on:

- greater provision of self-help through information including the use of technology and recovery communities
- resources for young people and families with a whole family approach to alcohol and drugs
- mental wellbeing, money and housing advice and support to sustain recovery

Integrated and Coordinated Care

The messages from our recent public engagement events show that people wish to receive treatment as close to home as possible. They want services to be personalised to their specific needs and delivered in a joined-up way that offers consistency and opportunities to access support in the local community. A whole systems approach based on the Recovery Orientated Systems of Care is our overall aim.

Managing Our Resources Effectively

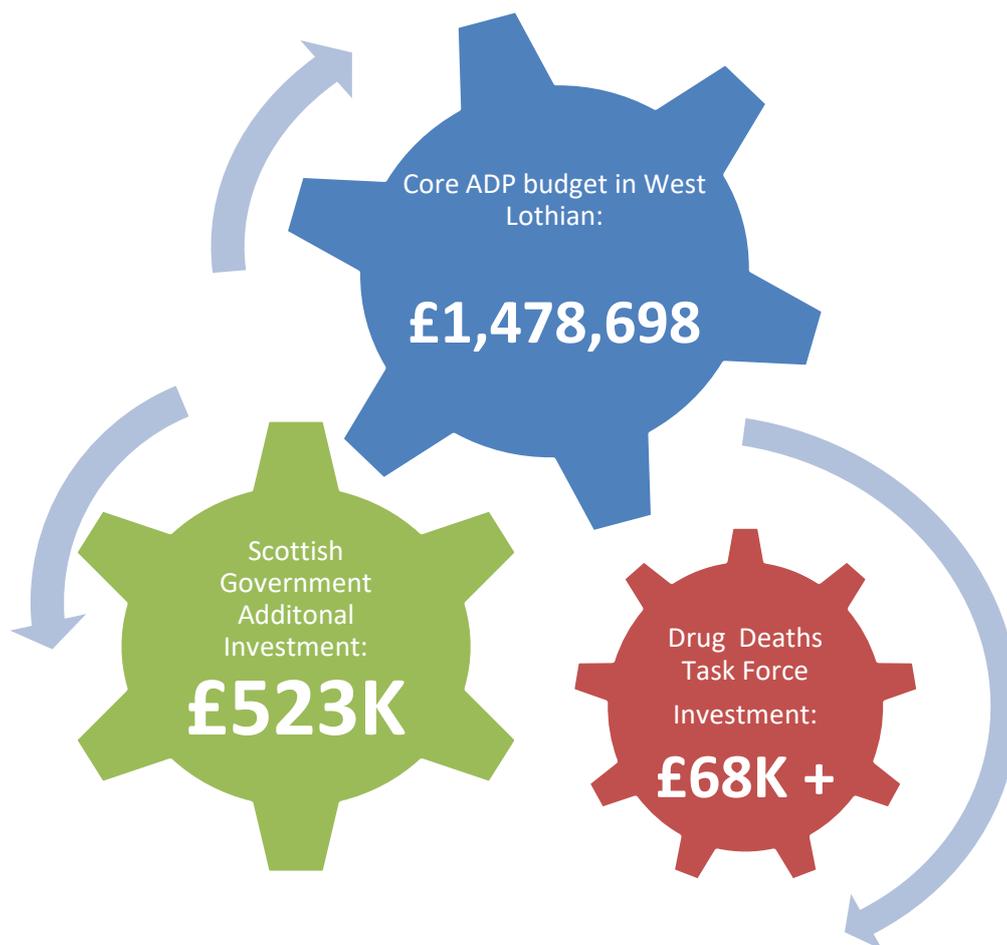
To improve experience, reduce waiting times and ensure people get faster access to the treatment they need, we will review and develop our services to ensure that people are directed at the right time to the supports and services which best meet their needs.

We recognise there are substantial challenges in the recruitment of health and social care staff in Scotland. Having a workforce with the right skill, at the right time and in the right place provides the foundation for the delivery of effective health and social care services. Our transformational change programmes will link closely to the IJB's Workforce Development Strategy to ensure that development of our workforce aligns to our strategic priorities. We will support new IT data systems including the Dalsy system for national alcohol and drug services.

8. Finance

The core budget to be spent in West Lothian in 2020/21 is £1,478,698. This is made up of funding from NHS Lothian, West Lothian Council and the Scottish Government. Additional Investment of £523,000 from the Scottish Government, first allocated to services in 2018, continues in 2020/21 and will supplement the core budget.

The ADP submitted a proposal for Drug Death Task Force Funding and was successful in securing £68,000 to support local priorities. The ADP has noted its interest for wider test of changes to support further change and additional investment in West Lothian. It is the vision with this new Strategic Commissioning Plan being in place that decisions on investment can be made swiftly by the ADP and IJB.



9. Next Steps

The Alcohol and Drug Commissioning Plan is designed to run for 3 years from 2020 to 2023. Some of the priorities outlined in the plan have an end date beyond the life of the commissioning plan as they are linked to developments with a longer timescale. Decisions on the investment and disinvestment of resources will require to be made as the actions outlined below are progressed.

A comprehensive action plan will support the development and will incorporate the strategic priorities contained in this commissioning plan. Progress will be monitored via the Alcohol and Drug Partnership and the IJB's Strategic Planning Group.

The Alcohol and Drug Commissioning Plan will be reviewed annually against the IJB's Strategic Plan in the form of an annual report which will summarise activity, progress and performance for the year.

	Area of Development	Actions	Outcomes (Appendix3)	Strategic Priorities	Measures	Timescale	Lead Officer(s)
1. Access to information							
1.1	People have access to the information they need, when they need it and in an	- Ensure people with addictions and carers have access to local and up to date information and advice. This should be available in both online and in leaflet form. This should include options for technology enabled care	1,2,4,5,6,9	TI, P&EI, MRE	Review of Commissioned Services	December 2020	Deborah McAlpine

	Area of Development	Actions	Outcomes (Appendix3)	Strategic Priorities	Measures	Timescale	Lead Officer(s)
	appropriate format	- Ensure all information , advice and advocacy services are reaching out to those with addictions and carers	1,2,3,4,5,6,7,9	TI, P&EI, ICC, MRE	Review of Commissioned Services	September 2021	Mhairi Walker
		- Set up service user and carer forums building on existing groups	4,6,8	TI, ICC	Forums become operational	March 2021	Kate Marshall
2. Ensuring choice through Self- Directed Support							
2.1	Focus on market development to ensure people have access to opportunities which enable personal outcomes to be met.	- Ensure practitioners and business support services and other stakeholders are involved in shaping market development.	2,3,8,9	ICC, MRE	Market Facilitation Plan Updated and published	Annual Update 2020-2023	Mhairi Walker
		- Ensure service users, service providers and carers have a say in how future services should be developed.	1,3,4,8,9	EI&P, TI, MRE	Feedback through Service user forums	Annual Update 2020-2023	Deborah McAlpine
		- Ensure those wishing to receive a direct payment have information and advice to achieve their personal incomes.	1,3,4,9	EI&P, TI	Evidence of choice and advice being given within practice teams	March 2021	Service Leads

	Area of Development	Actions	Outcomes (Appendix3)	Strategic Priorities	Measures	Timescale	Lead Officer(s)
3. Access to services and waiting times							
3.1	Ensure people who need services have access to them within agreed timescales	- Continue to meet and exceed the A11 target and explore options to deliver same day prescribing. Strive to get those seeking treatment a service without delay.	3,4,5,7,9	TI, P&EI, ICC, HRE	A11 target and waiting times database	December 2020	John Mclean
		- Undertake an analysis of Demand, Capacity, Activity and Queue (DCAQ), develop a clear understanding for psychology Tier 1 and Tier 2 input.	3,9	MRE, P&EI	Report on Findings	December 2020	Nick Clater
3.2		- Develop skills across the partnership in Tier 3 and Tier 4 psychology inputs. This should form part of a Workforce Strategy.	2,5,7,8	ICC, MRE, TI	Numbers trained	October 2021	Nick Clater
		- Develop an action plan for delivery of sustained improvement in access for psychology	2,3,4,5	ICC, MRE	Action Plan and Waiting Times	May 2021	Nick Clater

	Area of Development	Actions	Outcomes (Appendix3)	Strategic Priorities	Measures	Timescale	Lead Officer(s)
3.3	Review Pan-Lothian provision	- Review Pan- Lothian Services with a view to see more services delivered locally including Community Rehab and access arrangements for West Lothian Residents of current provision. Consultation will be required across Lothian IJBs.	2,3,5	MRE, ICC, TI	Review Findings	March 2022	John Mclean
3.4	Development of a 'safe space' model of care	- Explore options for the development of a safe space/place of safety to support people who are intoxicated or in distress as an alternative to hospital attendance	7,9	EI, MRE	Model of care and support developed and implementation plan agreed	April 2023	Nick Clater
3.5	Mental Health Service	- A multidisciplinary group including Mental Health Consultant to lead on exploring ways to address the unmet needs and enduring mental health care.	3,4,7	TI, ICC	Model of care and support developed and implementation plan agreed	September 2021	Dr Daniel Mogford
3.6	Crisis Service	- A system to be put in place to offer support and advice for people in crisis out with office hours.	3,4,5,7	TI, ICC	Review of Commissioned Services	September 2021	Mhairi Walker

	Area of Development	Actions	Outcomes (Appendix3)	Strategic Priorities	Measures	Timescale	Lead Officer(s)
4. Supporting families and carers							
4.1	There is a duty for local authorities to provide support to carers, based on the carer's identified needs which meet the local eligibility criteria	- Review unpaid carers Advocacy in West Lothian	1, 2, 3, 4, 6, 8	EI&P, TI	Tender specification developed for independent advocacy	March 2021	Mhairi Walker
		- Complete review and publish revised carer's strategy in line with the Carers (Scotland) Act 2016	1, 2, 3, 4, 6, 8	EI&P, TI	Strategy published	October 2020	Sharon Houston
		- Support all carers to access information, support and services in line with the Council's Carers Eligibility Framework	1, 2, 3, 4, 6	EI&P, TI	Number of carers supported	March 2023	Mhairi Walker
		- Ensure all Services identify or consider family engagement and implement a co-ordinated model to ensure family support tailored to individual family needs is provided.	2,3,6,7	ICC, HRE, P&EI	Implement and review of commissioned services	September 2021	Deborah McAlpine

	Area of Development	Actions	Outcomes (Appendix3)	Strategic Priorities	Measures	Timescale	Lead Officer(s)
5. Technology Enabled Care (TEC)							
5.1		- Explore the use of emerging mainstream and specialist technologies which may support those living with substance use problems	1,2,3,4,5,7	ICC, P&EI, MRE	Digital Strategy for the Health and Social Care Partnership to including substance problems	March 2021	Deborah McAlpine
6. Accommodation and supports							
6.1	People are supported to live at home in their community and those who are homeless or risk of being homeless are given the right advice and support	- Commission Services which provide care and support aligned to new models of housing and support to better meet the needs if people with substance misuse problems	1,2,4	P&EI, TI	Revised support contract in place with commissioned service.	June 2021	Mhairi Walker
		- Focus on preventing homelessness and increasing options for those with substance issues.	2,3,4,5	P&EI, TI, MRE	Revised structure within Housing Need for Substance issues	December 2020	Katy McBride

	Area of Development	Actions	Outcomes (Appendix3)	Strategic Priorities	Measures	Timescale	Lead Officer(s)
		- Continue the development of the Housing First model for those with Substance Misuse and mental health problem	1,2,4	P&EI, TI	Model developed and evaluated through the PSP	September 2021	Katy McBride
7. Workforce Development							
7.1	Build on work to support people who work in health and social care with up to date training	- Progress to be made on an ADP workforce development planning. This should be informed by the recommendations in the Needs Assessment 2019. This should link in to the Health and Social Care Partnership Workforce Development Strategy.	8	ICC , MRE	Workforce plan developed and implemented	March 2021	Nick Clater
		- Training on Stigma & Trauma to be incorporated into generic training such as Learnpro to be targeted at generic services for those with little experience of working with problematic drug and alcohol use.	3,8	TI	Training incorporated	March 2022	Kate Marshall

	Area of Development	Actions	Outcomes (Appendix3)	Strategic Priorities	Measures	Timescale	Lead Officer(s)
8. Data systems							
8.1	Continue to invest in and use the CHIN data to support intelligence lead services and identify any trends in substance use or behaviours or gaps in service.	- Continue to work with the Scottish Government and ISD to develop and implement the new Daisy system	8,9	ICC & MRE	System implemented	January 2021	Isobel Meek
		- Establish a system to collect data on young people affected through substance misuse using the new Social Policy Information System currently being procured.	8,9	ICC & MRE	System implemented	March 2024	Isobel Meek
		- Increase the use of joint systems in the Community Addictions Service West Lothian	8,9	ICC & MRE	Model agreed	December 2020	John McLean

	Area of Development	Actions	Outcomes (Appendix3)	Strategic Priorities	Measures	Timescale	Lead Officer(s)
9. Supporting good physical health							
9.1	People with substance misuse problems have opportunities to improve physical health	- Benchmark services against agreed standards for physical health. Explore options to increase joint working with Primary Care to address physical health issues alongside substance use or build capacity in substance use staff to identify & address physical health where appropriate. -	1,4,5	TI & ICC	Options report	March 2022	John McLean
9.2	Develop community links to support people to achieve better physical health	- Explore opportunities to encourage people in recovery to access local leisure opportunities which support improved physical health.	1,4	TI, P & EI	Options report	March 2022	Deborah McAlpine
		- Pilot a project to support people in recovery to stop smoking.	1,4	TI, P & EI	Evaluation report of pilot	March 2022	Brian Pringle

	Area of Development	Actions	Outcomes (Appendix3)	Strategic Priorities	Measures	Timescale	Lead Officer(s)
10. Drug Related Deaths Specific							
10.1	Reduce drug related deaths.	- Increase naloxone distribution across service users, family and carers, health touch points such as pharmacy and health centres and other places in the community. This should include regular replacement and training. Commission a specific Naloxone Champion for West Lothian.	6,7,9	TI & ICC	Number of kits distributed and increase in settings.	Increase each year in plan.	Third Sector Naloxone Champion for West Lothian.
		- Establish an effective anticipatory care system including for follow up of people who have had a non-fatal overdose or who are at extreme risk of harm from drug use.	4,5	TI & ICC	Care System Established	October 2020	Dr Daniel Mogford
		- Same day prescribing to be available for those assessed as requiring OST.	3,4	TI, ICC	Average Days to first prescription.	March 2021	Ian Davidson
		- Optimise Public Health Surveillance increase input from the Lothian Combined Health Intelligence Node (CHIN)	9	TI, ICC	Services and workers can react based on intelligence.	March 2021	Duncan McCormick

	Area of Development	Actions	Outcomes (Appendix3)	Strategic Priorities	Measures	Timescale	Lead Officer(s)
11. Alcohol Related Deaths Specific							
11.1	Specific focus on alcohol related deaths	- Focus on ARD is on each action plans across the partnership. Support for developing an alcohol pathway for the local area.	7,9	TI & ICC	Plans and completed pathway	September 2021	Nick Clater
12. Harm Reduction							
12.1	Approach to harm reduction	- Review pharmacy contracts and investment to explore the options for more enhanced pharmacy services including for patients accessing OST.	5, 9	P & EI & MRE	Contracts Reviewed	September 2021	Nick Clater
		- Continue to develop the Assertive Outreach Service focusing on retention, reaching & re-engaging people who drop out of treatment for addictions.	3,4,5	TI, ICC	Review of Commissioned Service	March 2021	Deborah McAlpine

	Area of Development	Actions	Outcomes (Appendix3)	Strategic Priorities	Measures	Timescale	Lead Officer(s)
13. Young People and Families							
13.1	Supporting young people and families	Ensure substance use (including prevention & early intervention) is included in work plans and other agenda's in relation to young people such as the WL Children and Family Management Group.	5	P&EI, ICC	Work Plans focusing on Substance Misuse	December 2020	Sharon Houston
		- Continue to support a Children Affected by Substance Misuse (CAPSM) service with a Family Support Service.	3,4,5	TI, P&EI	Review of Commissioned Service	December 2020	Mhairi Walker
		- Review the work of the new Young Person Worker with a view to increasing the resource if required.	1,3,5,7	P&EI, ,ICC	Review of Pilot	December 2020	Deborah McAlpine
		- Pilot a Dads project with support from external funding	4,7	TI, P&EI & ICC	Pilot bid with CORRA and project evaluated	December 2021	Alex Collop
		- Work with our colleagues in education linking in with national developments to support toolkits in schools	1,8	P&EI, MRE	Toolkits developed and reach measured	September 2021	Karen McNiven

	Area of Development	Actions	Outcomes (Appendix3)	Strategic Priorities	Measures	Timescale	Lead Officer(s)
14. Building on Recovery							
	Focus on building recovery	- Explore options for increasing specific benefits and debt advice for those with substance issues.	3,4	TI, P& EI	Range of options identified and signposting arrangements in place	2022	Mhairi Walker
		- Explore the use of bus passes for those in recovery in West Lothian.	1,2	TI, ICC	A report on those eligible for bus passes with a view of increasing reach	2021	Deborah McAlpine
		- Increase recovery cafes and groups across West Lothian.	1,2,4	TI, P &EI	Increase in numbers of recovery groups.	March 2021	Deborah McAlpine
		- Increase mental well -being activities for those in recovery across West Lothian. This includes meaningful activities.	1,2,4	TI, P& EI	Review of commissioned services	March 2021	Mhairi Walker

10. Monitoring and Review

A performance management framework will be developed to underpin the strategic commissioning plan. The performance framework will provide a mechanism for measuring progress and impact in relation to each of the priorities outlined in the plan.

The Alcohol and Drug Partnership which meets at least 4 times per year will oversee the implementation of the Alcohol and Drug Services Strategic Commissioning Plan. The ADP will provide performance and progress reports to the Strategic Planning Group.

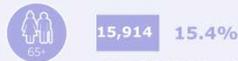
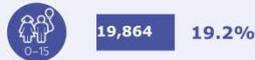
Formal updates on progress in relation to the commissioning plan will be submitted to the Integration Joint Board every 6 months.

Appendix 1 - Details

West Lothian - East Locality Profile



NRS: Mid-2018 Population Estimates



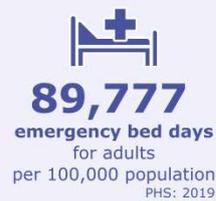
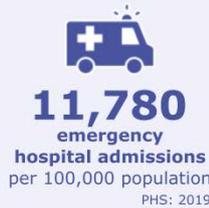
NRS: Mid-2018 Population Estimates

Life expectancy at birth



ScotPHO: 2014-18

12.8% SIMD2020
of the East locality population reside within the **20% most deprived** areas in Scotland



61% of home care clients receive a **telecare and/or community alarm** service
PHS: Jan-Mar 2018

18.7 falls
per 1,000 population aged 65+
PHS: 2019

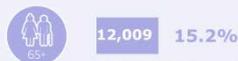
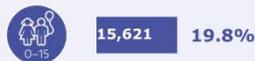
108
emergency readmissions within 28 days of discharge per 1,000 discharges
PHS: 2019

157,529
home care hours provided between Jan-Mar 2018
PHS: Jan-Mar 2018

West Lothian - West Locality Profile



NRS: Mid-2018 Population Estimates



NRS: Mid-2018 Population Estimates

Life expectancy at birth



ScotPHO: 2014-18

19.3% SIMD2020
of the West locality population reside within the **20% most deprived** areas in Scotland



62% of home care clients receive a **telecare and/or community alarm** service
PHS: Jan-Mar 2018

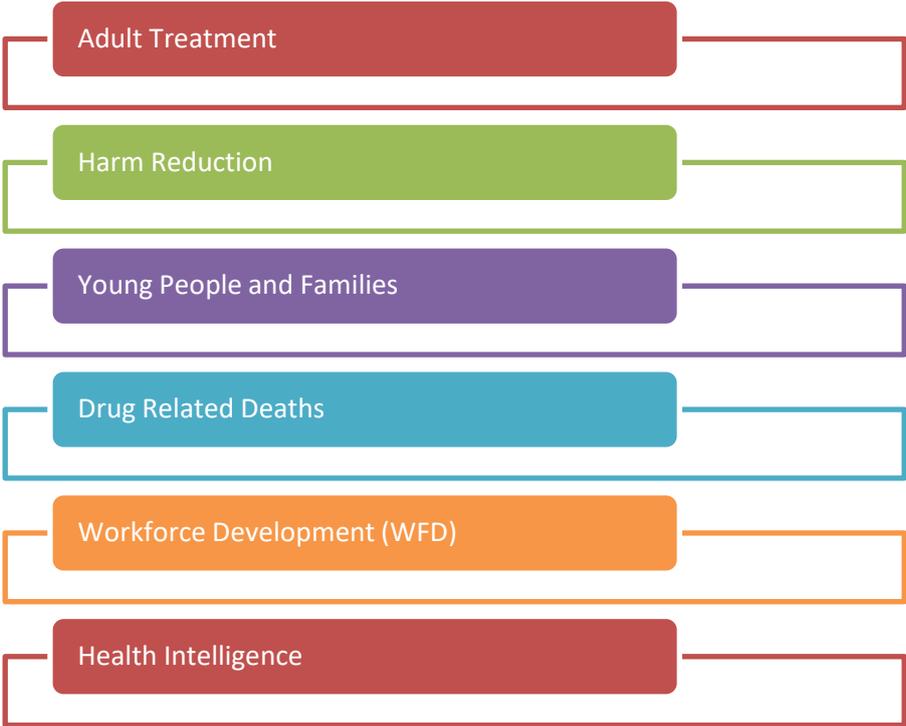
21.2 falls
per 1,000 population aged 65+
PHS: 2019

116
emergency readmissions within 28 days of discharge per 1,000 discharges
PHS: 2019

112,510
home care hours provided between Jan-Mar 2018
PHS: Jan-Mar 2018

Appendix 2 - 2019 Health Needs Assessment

NHS Lothian department of Public Health and Policy conducted a Health Needs Assessment in West Lothian which was completed in 2019. Public Health which collected data from service users, service providers and epidemiological sources. A number of themed recommendations have been presented in the Needs Assessment:



A number of recommendations are included in this Strategic Commissioning Plan. Public Health will continue to offer general support and implementation in relation to specific areas of work.

Appendix 3 - National Health and Wellbeing Outcomes

The 9 Scottish Government Health and Wellbeing outcomes:

1	People are able to look after and improve their own health and wellbeing and live in good health for longer.
2	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.
3	People who use health and social care services have positive experiences of those services, and have their dignity respected.
4	Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.
5	Health and social care services contribute to reducing health inequalities.
6	People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact of their caring role on their own health and well-being.
7	People who use health and social care services are safe from harm.
8	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.
9	Resources are used effectively and efficiently in the provision of health and social care services.

Appendix 4 - Links

Below are several strategies and strategic plans that complement the development of the Commissioning plans:

[West Lothian IJB Strategic Plan 2019-23](#)

[West Lothian IJB Participation and Engagement Strategy 2016-26](#)

[Active Travel Plan for West Lothian 2016-2021: Making Active Connections](#)

[West Lothian Children's Services Plan 2017-20](#)

[West Lothian Local Housing Strategy 2017-22](#)

[West Lothian People Strategy 2018/19-2022/23](#)

[West Lothian Anti-poverty Strategy 2018/19–2022/23](#)

Legislative context

[Community Empowerment \(Scotland\) Act 2015](#)

[Public Bodies \(Joint Working\) \(Scotland\) Act 2014](#)

[The Misuse of Drugs Act \(1971\)](#)

[The Medicines Act \(1968\)](#)

[The Psychoactive Substances Act \(2016\)](#)

[Mental Health \(Scotland\) Act 2015](#)

[Public Health etc. \(Scotland\) Act 2008](#)

[Community Care and Health \(Scotland\) Act 2002](#)

[Social Work \(Scotland\) Act 1968](#)

[The Equality Act 2010](#)

[The Equality Act 2010 \(Specific Duties\) \(Scotland\) Regulations 2012](#)

[Transport \(Scotland\) Act 2005](#)

[Social Care \(Self-directed Support\) \(Scotland\) Act 2013](#)

[Carers \(Scotland\) Act 2016](#)

National Strategies

[Rights Respect Recovery 2018](#)

[Rights Respect Recovery Action Plan 2019](#)

<https://www.gov.scot/publications/delivery-psychological-interventions-substance-misuse-services-scotland-report/pages/6/>

West Lothian Integration Joint Board

Direction – WLIJB18 Alcohol and Drug Partnership Services

1.	Implementation date	22 September 2020
2.	Reference number	WLIJB13
3.	Integration Joint Board (IJB) authorisation date	22 September 2020
4.	Direction to	NHS Lothian and West Lothian Council
5.	Purpose and strategic intent	<p>Substance Misuse Services</p> <p>To deliver high quality, locally managed services which are focussed on recovery and partnership working across health, social care and the third sector</p>
6.	Does it supersede or amend or cancel a previous Direction?	Yes - WLIJB13 23 April 2019
7.	Type of function	Integrated
8.	Function(s) concerned	Substance Misuse Services directed by the West Lothian Alcohol and Drug Partnership
9.	Required Actions/Directions	<p>Provision of alcohol and drug services and supports in West Lothian is a key strategic priority in the IJB's Strategic Plan. NHS Lothian and West Lothian Council are directed to implement the Strategic Commissioning Plan for Alcohol and Drug Services 2020 to 2023 and develop services in accordance with the actions outlined in that plan with focus on:</p> <ul style="list-style-type: none"> • Tackling drug and alcohol related deaths (DRD & ARD)/risks in the local ADP area. • Ensuring a proactive and planned approach to responding to the needs of prisoners affected by problem drug and alcohol use and their associated through care arrangements, including women

		<ul style="list-style-type: none"> • Continued implementation of improvement activity at a local level, based on the individualised recommendations within the Care Inspectorate Report, which examined local implementation of the <i>Quality Principles</i>. <p>To deliver priorities associated with additional investment</p> <ul style="list-style-type: none"> • Increased involvement of those with lived experience of addiction and recovery in the evaluation, design and delivery of services • Reduce waiting times for treatment and support services. Particularly waits for opioid substitution therapy (OST) including where these are reported as secondary waits under the LDP Standard; • Improved retention in treatment particularly those detoxed from alcohol and those accessing OS; • Development of advocacy services • Improved access to drug/alcohol treatment services amongst those accessing inpatient hospital services • Whole family approaches to supporting those affected by problem drug/alcohol use • Continued development of recovery communities.
10.	Budget 2019/20	Budget availability will be determined based on agreed IJB annual budgets for relevant functions. The IJB Chief Finance Officer should be consulted on financial implications arising from the implementation of this Directions and the ongoing delivery of Substance Misuse priorities.
11.	Principles	<p>Are integrated from the point of view of service users</p> <p>Take account of the particular needs of different service users</p> <p>Take account of the participation by service users in the community in which service live</p> <p>Improves the quality of the service</p> <p>Are planned and led locally in a way which is engaged with the community (including in particular service users, those who look after service users and those who are involved in the provision of health or social care.</p>

12.	Aligned National Health and Wellbeing Outcomes	<p>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</p> <p>People are able to look after and improve their own health and wellbeing and live in good health for longer</p> <p>Resources are used effectively and efficiently in the provision of health and social care services</p> <p>Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services</p>
13.	Aligned priorities, strategies, outcomes	<p>Tackling inequalities</p> <p>Prevention and early intervention</p> <p>Integrated and co-ordinated care</p> <p>Managing our resources effectively</p> <p>West Lothian IJB Strategic Plan and Alcohol and Drug Partnership Commissioning Plan</p>
14.	Compliance and performance reporting	<p>Performance reports to be submitted to the IJB. Details of the ways in which compliance and performance are measured and reported as set out in the Alcohol and Drug Partnership Commissioning Plan</p>
15.	Relevance to or impact on other Lothian IJBs and/or other adjoining IJBs	<p>No impact anticipated.</p>

WEST LoTHIAN IJB/HSCP PLANNING AND PERFORMANCE STRUCTURES

APRIL 2019

