

REPORT TO: East Lothian Integration Joint Board

MEETING DATE: 27 October 2022

BY: Chief Officer

SUBJECT: Medication Assisted Treatment (MAT) Standards

1 PURPOSE

1.1 This report seeks to update the East Lothian IJB in relation to the Medication Assisted Treatment Standards and the requirement to embed and implement these standards to 'enshrine a right's based approach to immediate, person centred treatment for problem drug use, linked to primary care, mental health and other support services'.

2 RECOMMENDATIONS

- 2.1 The IJB is asked to:
 - i. Note the specific responses, actions and oversight arrangements required by the Scottish Government to achieve implementation of the MAT standards.
 - ii. Approve and sign the MAT Standards Implementation Plan.
 - iii. Note quarterly progress update against the delivery of the MAT Standards Implementation Plan.

3 BACKGROUND

3.1 In response to the high level of drug related deaths within Scotland the Drugs Death taskforce has contributed to the development and the prioritisation and introduction of the Medication Assisted Treatment (MAT) standards, to help reduce deaths and other harms, and to promote recovery.

The term MAT is used to refer to the use of medication, such as opioids, together with psychosocial and social support, in the treatment and care of individuals who experience problems with their drug use.

The MAT standards (**Appendix 1**) are evidence based and define what is needed for the consistent delivery of safe and accessible drug treatment in Scotland.

The standards aim to:

- Improve access and retention in MAT
- Enable people to make an informed choice about treatment, care and support.
- Include families or nominated person(s) wherever appropriate
- Strengthen accountability and leadership so that the necessary governance and resource is in place to implement them effectively.
- 3.2 Initially the Scottish Government had announced that these standards needed to be embedded by April 2022, however in June 2022, Public Health Scotland published a MAT implementation Benchmarking Report which shows that whilst progress on implementation had been made in all areas, the MAT standards 1-5 had not been fully implemented fully by April 2022.

The benchmarking report as detailed in **Appendix 2**, provided the RAG status for each of the MAT standards 1-5 for each Alcohol and Drug Partnership area and you will note that East Lothian was RAG rated RED for MAT 1 and AMBER for MAT 2-5.

In response to this report and in order to achieve full implementation of MAT standards 1-5 by April 2023, Ministers recommended that the following actions and oversight arrangements are put in place for each local area:

- By end of September, Chief Officers and Chief Executives personally sign times, specific and published Improvement plans for implementing the standards.
- Chief Officers and Chief Executives take shared and visible responsibility for delivering the standards.
- Chief Officer and Chief Executives include reports on progress against the delivery of the MAT Standards Implementation Plan, as well part of the regular Board quarterly reporting against Annual Delivery Plans.
- 3.3 The Scottish Government also announced additional funding to support the implementation of the standards.

East Lothian originally bid for £224,500, however only £156,115 was allocated from the Scottish Government and MELDAP matched the remaining £68,385. This has allowed us to employ additional staffing to ensure improved access and retention in MAT.

- 3.4 Over the last few months, considerable work has been undertaken across all ADP partners within East Lothian to ensure that the criteria and principles set against each MAT Standard are fully understood to support people in their MAT treatment in recovery and to inform how services will be accessed and delivered. These are detailed in local implementation plans and progress will be monitored through the following governance routes:
 - East Lothian HSCP and partners will meet monthly as part of the Substance Use Business meeting to monitor and progress actions.
 - MAT Implementation Meeting which will review progress against the agreed actions and will ratify a quarterly report which will highlight risks to delivery
 - 2 monthly update report will be presented by Operational Strategic Managers to the MH/SUS Change Board
 - The quarterly report will be presented to East Lothian Senior Management Team for comment, to note progress and to address any risks to delivery.
 - The report will be presented to the Chief Executive of East Lothian Council and NHS Lothian for agreement and sign off prior to submission to Scottish Government.
- 3.5 The Scottish Government have also requested that each Integration Authority submit a MAT Standards Implementation Plan to set out the actions being taken to meet the standards and respective criteria for each MAT standard.
- 3.6 The first plan as detailed in **Appendix 3** was submitted to the Scottish government on 06/10/2022 and provides a high level summary of the progress made to date and confirms that East Lothian are on track to meet the MAT standards 1-5 by April 2023.
- 3.7 The IJB are required to sign off this plan as one of the key delivery partners, alongside NHS Lothian and East Lothian Council.
- 3.8 East Lothian HSCP is also required to submit the first quarterly progress report by 21/10/2022 to cover the period July to September 2022.

4 ENGAGEMENT

4.1 The Scottish Government has established an implementation support team (MIST) which includes practitioners and people with lived experience. It is led by Public Health Scotland to support local areas scale up and implement the standards.

- 4.2 East Lothian is fully engaged with MIST in relation to data collection and delivery of standards. MIST also facilitated a local workshop event with key stakeholders to support teams to deliver and meet MAT standards and to agree quality Improvement Project Charter.
- 4.3 Local stakeholders within East Lothian are fully engaged in this process and will continue to engage and involve People with Lived Experience to ensure their experience and feedback informs delivery of treatment and support.
- 4.4 There will also be People with Lived Experience and family/carer representation on the QI project team.

5 POLICY IMPLICATIONS

5.1 This will be reviewed as standards are fully implemented.

6 INTEGRATED IMPACT ASSESSMENT

6.1 Integrated Impact Assessment (IIA) will be required to be carried out.

7 RESOURCE IMPLICATIONS

7.1 Financial

Funding Source 2022/26	Amount
MIST – Annual Funding	£156,115
MELDAP Match Funding	£68,385
Total	£224,500

7.2 Personnel

POST (Whole Time Equivalent)	Cost pa Funding Requirement	Duration
1 WTE Band 7 Clinical Nurse Specialists/NMP's	£63,500	4.5 yrs
2 WTE Staff Nurse (AFC Band 5)	£86,000	4.5 yrs
1.5 WTE Substance Use Staff (MELD)	£60,000	4.5 yrs
0.5 WTE Band 3 administrative support	£15,000	4.5 yrs
Total	£224,500	

8 BACKGROUND PAPERS

8.1 None.

Appendix 1 – MAT Standards

Appendix 2 – Benchmark Report

Appendix 3 – MAT Standards Implementation Plan

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DATE	18/10/2022

appropriate dose.

commence or continue MAT.

MAT standards summary

Medication assisted treatment (MAT) is used to refer to the use of medication, such as opioids, together with psychological and social support, in the treatment and care of individuals who experience problems with their drug use.

The standards aim to improve access, choice and care and to ensure that MAT is safe and effective.

1. All people accessing services have the option to start MAT from the same day of presentation.

- 2. All people are supported to make an informed choice on what medication to use for MAT, and the
- 3. All people at high risk of drug-related harm are proactively identified and offered support to
- 4. All people are offered evidence-based harm reduction at the point of MAT delivery.
- 5. All people will receive support to remain in treatment for as long as requested.
- 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.
- 7. All people have the option of MAT shared with primary care.
- 8. All people have access to independent advocacy and support for housing, welfare and income needs.
- 9. All people with co-occurring drug use and mental health difficulties can receive mental health care at the point of MAT delivery.
- 10. All people receive trauma-informed care

NHS Board	ADP area	MAT 1 evidence, April 2022	MAT 2 evidence, April 2022	MAT 3 evidence, April 2022	MAT 4 evidence, April 2022	MAT 5 evidence, April 2022
Greater Glasgow & Clyde	West Dunbartonshire	Red	Amber	Amber	Amber	Amber
Highland	Argyll & Bute	Red	Red	Red	Amber	Amber
Highland	Highland	Red	Amber	Amber	Amber	Amber
Lanarkshire	North Lanarkshire	Red	Amber	Amber	Amber	Red
Lanarkshire	South Lanarkshire	Red	Amber	Amber	Amber	Amber
Lothian	Edinburgh	Amber	Amber	Amber	Amber	Amber
Lothian	Mid & East Lothian	Red	Amber	Amber	Amber	Amber
Lothian	West Lothian	Amber	Amber	Amber	Amber	Amber
Orkney	Orkney	Red	Amber	Amber	Amber	Red
Shetland	Shetland	Red	Amber	Red	Amber	Amber
Tayside	Angus	Red	Amber	Amber	Amber	Amber
Tayside	Dundee	Red	Amber	Amber	Amber	Amber
Tayside	Perth & Kinross	Red	Amber	Amber	Amber	Amber
Western Isles	Western Isles	Red	Amber	Amber	Amber	Amber

Table description: This table provides the detail of RAG status for each of MAT standards 1–5 for each ADP area. This information is presented visually in **Appendix 4: Maps**.

MAT STANDARDS IMPLEMENTATION PLAN

APPENDIX 3

This MAT Standards Implementation Plan has been produced to set out actions being taken in the Integration Authority area:

East Lothian Health and Social Care Partnership

The lead officer/post holder nominated to ensure delivery of this Implementation Plan is:

Name	Position/Job Title
Fiona Wilson	Chief Officer East Lothian IJB

This Plan is intended to ensure that services in the Integration Authority area are meeting the standards and the respective criteria for each standard as set out in the Drug Deaths Taskforce report: Medication Assisted Treatment standards: access, choice, support published in May 2021.

This Plan has been developed by partners and has taken account of the voices of lived and living experience. The Governance arrangements for local oversight of progress against this Plan, including the role of lived and living experience in this is as follows:

The plan has been developed alongside all ADP partners.

East Lothian will continue to engage and involve People with Lived Experience to ensure their experiences and feedback informs delivery of treatment and support.

Governance arrangements

- East Lothian HSCP and partners will meet monthly as part of the Substance Use Business meeting to deliver actions identified against each MAT standard and criteria. This group will then report to a new MAT Implementation Meeting which will review progress against the agreed actions and will ratify a quarterly report which will highlight risks to delivery.
- Monthly meetings will be held with MELDAP, ELHSCP Operational Strategic Managers, Head of Service and Chief Officer
- 2 monthly update report will be presented by Operational Strategic Managers to the MH/SUS Change Board
- The quarterly report will be presented to East Lothian Senior Management Team for comment, to note progress comment and to address any risks to delivery.
- The report will be presented to the Chief Executive of East Lothian Council and NHS Lothian for agreement and sign off prior to submission to Scottish Government.

Timelines will be established once Scottish Government have confirmed submission dates.

This Plan has been signed off on behalf of the delivery partners by:

Name	Position	Delivery Partner	Date signed
Fiona Wilson	Chief Officer	East Lothian HSCP	Agreed in principle 2/10/22
Callum Campbell	Chief Executive	NHS Lothian	Agreed in principle 2/10/22
Monica Paterson	Chief Executive	East Lothian Council	Agreed in principle 2/10/22
Peter Murray	Chair of IJB	East Lothian HSCP	Agreed in principle 2/10/22
Iain Gorman	Head of Service/ Chair of MELDAP	East Lothian HSCP	

Appendices:

- Appendix 1: Key Delivery risks
- Appendix 2: Summary of recruitment plans:
- Appendix 3: Summary of developmental/ QI projects:
- Appendix 4: Glossary of abbreviations:

Background reading:

Evidence-based assessment of progress, MAT standards 1–5. April 2022, East Lothian <u>Supplementary information for the national benchmarking report on implementation of the Medication Assisted Treatment (MAT) standards. 2021/22 p375-390)</u>

High Level Actions relating to the implementation of MAT within ELHSCP

MAT Standard 1	All people accessing services have the option to start MAT from the same day of presentation.	April 2022 RAG status: Amber. Implement changes agreed with MIST teams as part of TOC			
		September 2022 – Initially East Lothian were able to offer clinics three times a week, however, we are currently able to offer appointments slots each day for ORT/MAT assessment and treatment start/prescribing and from 31/10/2022 we will have increased capacity to offer same day access, 5 days for people who present or are referred from other agencies.			
Actions/delivera	bles to implement standard 1		Lead	Timescales to complete	
. d	ity of ESK Centre clinic to offer same da ays a week, expanding to include outrea	ach		·	
Recruitment of s	taff to East Lothian Substance Use Serv	vice (ELSUS)			
Funding confirmation		MELDAP	30 th April 2022		
First round of Adv	rertisement		ELSUS	31 July 2022	
Recruitment to all posts			ELSUS	31 October 2022	
Expansion in vo	luntary sector partner's (MELD) capacit	у			
Funding confirmation/ contracts in place		MELDAP	31 August 2022		
First round of Advertisement		MELD	30 September 2022		
Second round of	advertisement (if needed)		MELD	31 Dec 2022	
Test of Change -	- Contact Centre and Clinics				

Continue to develop single point of contact service model and robust pathways/protocols to ensure same day access if indicated or advice/guidance for other services/professionals.	MELD/ELSUS	31 October 2022
Standard operating procedures, improved pathways are in place, including outreach support for those people who can't access Esk Centre clinic	ELSUS/MELD	30 November 2022
Increased capacity at ESK Centre, 5 days a week clinic operational, supporting existing and self-referrals/new patients.	ELSUS	31 October 2022
Quality improvement charter agreed	NHL PH/ ELH&SCP/ MIST	31 October 2022
Monitoring and oversight		
Monthly Meetings with Chief Officers and Head of Service in EL	ELH&SCPMELDAP	31 October 2022
MAT 1 reporting submitted to SG/ PHS	NHSL PH	28 Feb 2023
Six month progress report	ELH&SCP/ NHSL PH	30 June 2023
Community Justice		
Ensure that those identified in police custody or courts as needing treatment	MELDAP and various local	31 March
have access to assessment and treatment start in situ, a direct pathway for	partners alongside MIST	2023
continuity of prescribing and outreach to support continued engagement		
Ensure, treatment can be initiated in HMP Edinburgh and that all people	ELSUS and Community	31 March
returning to East Lothian from any prison have continuity of care, this is managed through our current transform meeting/pathway	Justice	2023

informed choice on what medication to use for MAT and the appropriate dose.		April 2022. RAG status: Amber The key development in this area is roll out of Buvidal and evidence of people being involved in the type of medication that best meets their needs. September 2022 – within East Lothian, many elements of		
		this standard have been met and buvidal is now consi as a treatment option for both new and existing/conve within a primary and secondary care setting. Main pric are to identify local community pharmacies within Eas Lothian to support with dispensing arrangements		new and existing/conversions y care setting. Main priorities pharmacies within East
Actions/deliverables to	implement standard 2		Lead	Timescales to
Improve access to Buvi	dal			complete
Recruitment to ELSUS to				
Funding confirmation			MELDAP	31 December 2021
First round of Advertisement		ELHSCP	30 September 2022	
Second round of advertis			ELHSCP	31 December 2022
Recruitment in place	,			
Clinic set up and pathw	ay development			
Service procedures, pathways and protocols further developed and implemented and will include a pathway for those who do not wish psychosocial support in addition to MAT		•	ELSCP	31 Dec 2022
Clinics will continue to develop and expand to create additional capacity to accommodate new patients and ongoing reviews/administration of medication.			ELSCP	31 Dec 2022
Establish arrangements	for community pharmacy Dispensing			
Pilot sites to be identified and set up within in East Lothian		REAS	31 March 2023	
Evaluation of Pharmacy E	Buvidal dispensing		REAS	31 December and 31 March 2023
Systematically offer cho	pice to existing patients in primary and s	secondary		

Whilst pathways in place, they will be further developed to create additional capacity within both primary and secondary care	ELSUS	31 December 2022
Monitoring and avaraight		
Monitoring and oversight		
eAnnual MAT 2 reporting submitted to SG/ PHS	NHSL PH	Feb 2023
Ensure that those identified in Police custody or courts as needing treatment or those on DTTO have access to the full range of medications	MELDAP and various local partners alongside MIST	31 March 2023
Ensure that treatment options in HMP Edinburgh include all medications	MELDAP and various local partners alongside MIST	31 March 2023

MAT Standard 3	All people at high risk of drug-related harm are proactively identified and offered support to commence or continue MAT.	RAG status: Amber East Lothian SUS Team and MELD have established an agreed approach involving outreach nurse and peer worker who will reach out to people who are identified as being in crisis and at high risk of drug related death and harms and those who have experienced NFO. Subject to the outcomes of the performance monitoring exercise, it is anticipated that the current work plus planned actions (including additional investment) will deliver the standard before April 2023. September 2022 – Existing approach/pathway continues to be developed to ensure robust follow-up within 72 hours timescale and now involves partners across East Lothian including housing and community justice. Priorities are recruitment to peer worker post and the development of outreach clinics.		
Actions/deliverables t	o implement standard 3		Lead	Timescales to complete
Pathway development	t and standardising practice:			•
Service procedures, pa	thways and protocols further developed ac	ross partners.	NHSL PH	30 Nov 2022
Existing EL NFO working group to make recommendation on practice including development of related performance metrics		MELDAP	30 Nov 2022	
Develop package of support including Naloxone, IEP, mobile phone (with key contact		ELSUS	30 Nov 2022	
,	cluding those experiencing NFO who do no	t want to engage with		
treatment services at po	•			
Expanding capacity a	nd securing funding			

October 2022

31 Dec 2022

31 Dec 2022

ELSUS/MELD

ELSUS/MELD

On-going recruitment of MELD worker to support outreach model

other relevant services to support MAT 3 delivery in these settings

Explore and agree a standard to improve joint working and training offer with homeless and

Develop as test of change the use of Low Threshold Café's in areas of high DRD/NFO to

Reaching high risk individuals in specific environments:

engage with people at high risk of harm (Pennypitt)

Develop and implement clear joint protocols (rapid response) for disengagement	ELSUS/MELD	31 Dec 2022
Continue transition meeting for People Prison Liberation	ELSUS/Housing	30 October
	and CJ	2022

b	All people are offered evidence- based harm reduction at the point of MAT delivery.	RAG status: Amber: most interventions are available in most settings and it is anticipated that the current work plus planned actions will deliver the standard before April 2023. September 2022: all clinical staff have or will be trained in IEP, DBST and staff continue to offer naloxone training and awareness across East Lothian.		
Actions/deliverables to	implement standard 4		Lead	Timescales to complete
BBV testing				
	portion of staff trained (nursing and vol	sec)	ELSUS/MELD	30 October 2022
Action plan for each team	n to bring it towards 100%		ELSUS/MELD	30 Nov 2022
Audit of case notes underway by BBV specialist to proactively identify those at risk of BBV's who have not recently been screened and to identify patient lost to follow-up. Themes to be identified and action plan to be developed		ELSUS/MELD	March 2023	
Assessment of injecting	g risk (IEP)			
Survey to identify the proportion of staff who have completed injecting training (nursing and vol sec)		ELSUS/MELD	30 October 2022	
Action plan for each team	n to bring it towards 100%		ELSUS/ REAS	30 Nov 2022
Naloxone and overdose	e awareness training			
Collate existing data re training offered and delivered and identify and prioritise target groups across East Lothian.		ELSUS/MELD	31 March 2023	
Wound Care				
Set up a local clinic within East Lothian due to increase in demand		ELSUS/NHS Lothian	31 March 2023	
Pathways				

Update pathways including documentation to ensure all patient is offered harm	ELSUS/MELD	31 Jan 2023
reduction at point of assessment, reviews and follow-up		

MAT Standard 5, & 7 and Treatment target:	All people will receive support to remain in treatment for as long as requested and will have the option of MAT shared with Primary Care; increase by 9% the numbers on Opiate Replacement Treatment by April 2024

RAG status: Amber Current caseloads within ELSUS are 256 in core service and 255 in primary care. The assertive outreach support in GP practices already in place should continue to transfer people to primary care.

East Lothian will work to engage an increase in 9% of individuals in to treatment by April 2024, within the core service, which is an average 23 new individuals.

Actions/deliverables to implement standard 5, 7 and Treatment Target	Lead	Timescales to complete
Expand and diversify workforce in locality teams		
Recruitment in ELSUS		
Funding confirmation	MELDAP	31 August 2022
First round of Advertisement	ELSUS	30 September 2022
Second round of advertisement (if needed)	ELSUS	31 Dec 2022
Expansion in voluntary sector partner's (MELD) capacity		
Funding confirmation/ contracts in place	MELDAP	31August 2022
First round of Advertisement	MELD	30 Sept 2022
Second round of advertisement (if needed)	MELD	31 Dec 2022
Develop new models of care through tests of change		
Consider ORT review clinic similar to buvidal clinic for those individuals	ELSUS	31 December 2022
who do not want access to psychosocial element of treatment and		
support.		

Develop as test of change the use of Low Threshold Café's in areas of high DRD/NFO to engage with people at high risk of harm (Pennypitt)	ELSUS/MELD	31 Dec 2022
QI charters/ baseline measures	ELSUS with support from NHSL PH and MIST	30 November 2022
QI charters/ baseline measures	ELHSCP with support from PCFT, NHSL PH and MIST	30 November 2022
Improved throughput, case management and role delineation		
QI charters/ baseline measures	ELHSCP with support from NHSL PH and MIST	30 November 2022

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.	NHS Lothian Psychology have developed an implementation and delivery plan and policy to ensure all staff receive appropriate training to deliver psychologically-informed care and structure psychosocial interventions.
		A number of actions are already complete eg local steering group established and an implementation plan is in place across NHS Lothian.

Continue to implement plan developed by NHS Lothian Clinical Psychology as noted below:

Actions/deliverables to implement standard 6	LEAD	Timescales to complete
Establish required MAT 6 strategic leadership/steering group with appropriate membership and function	NHSL Clinical Psychology	Complete
Develop an overall MAT 6 delivery plan for ELHSCP	NHSL Clinical Psychology	Complete

	NHSL	
Develop service specific delivery plans for East Lothian HSCP (including a framework for	Clinical	31 Dec 2022
evidencing and reporting implementation progress)	Psychology	01 000 2022
evidencing and reporting implementation progressy	NHSL	
To carry out a baseline audit of current service delivery in relation to the key elements of Mat 6.	Clinical	
This includes:	Psychology	
This includes.	1 Sychology	
a) Staff survey		Complete
b) Service user survey		04.0 4.1 00
c) Trauma informed walk round – Esk Centre		31 October 22
Initiate ongoing process of service development/ improvement to ensure the service culture	NHSL	31 March
and environment is psychologically-informed	Clinical	2023
	Psychology	
Develop a workforce development plan clearly outlining MAT 6 training and supervision	NHSL	
requirements and plans for delivery.	Clinical	Complete
	Psychology	•
	NHSL	
Make available training, coaching and supervision for staff in key evidence-based MAT 6	Clinical	Complete
psychosocial interventions	Psychology	·
	NHSL	31 Dec 2022
Make available regular reflective practice space for staff working across all service areas	Clinical	
	Psychology	
	NHSL	
Ensure appropriate staff have psychosocial interventions delivery, with protected time to deliver	Clinical	
(and attending coaching/supervision)	Psychology	31 Dec 2022
	NHSL	
Develop resources (tools, manuals etc) to support staff to deliver MAT 6 psychosocial	Clinical	31 Dec 2022
interventions	Psychology	
	NHSL	
Establish a collaborative MAT 6 care planning process which has the service users' views at the	Clinical	31 Dec 2022
centre.	Psychology	

Continue to work with third sector providers who support families, carers and children who are affected by substance use to ensure that they receive appropriate psychological support and to address any associated trauma.					31 March 2022
MAT Standard 7	All people have the option of MAT shared with Primary Care. Within East Lothian, the primary care substance use service was implemented in May 2019 and this model is well established within 12 out of 14 GP practices across East Lothian MIST are to support East Lothian to write this up to promote good practice. Up and running and to write up model with support from MIST/ finalise SOP etc/ commenced May 2019. Ormiston – look to develop more rural areas/outreach.				nodel is well ces across East to write this up to h support from 2019. Ormiston –
With support from MIST, write up model and promote good practice ELSUS with support MIST				eb 2022	
Further develop model to develop more rural areas/outreach and ELSUS encourage x 2 GP practices who chose to opt out of model to engage				31 M	arch 2023

MAT Standard 8	All people have access to independent				
	advocacy and support for housing, welfare				
Actions/doliverables	and income needs. to implement standard 8			Timescales	Lead
Actions/deliverables	to implement standard o			to complete	Leau
Continue provision of I	ndependent Advocacy through CAPS and Access t	o Indus	stry, access to	Ongoing	MELDAP
	ervices in locality teams and primary care; continue				
sector case management CIRCLE/COEL/MELD)	sector case management to all secondary care patients; provide support for families (through				
Publish leaflet detailing to receive them	MAT rights and the organisations who will advoca	te and	support patients	Feb 2023	MELDAP
	Undertake development with treatment teams to ensure that pathways to these services are understood by all frontline practitioners			March 2023	ELSUS/MELD
	•				
MAT Standard 9	All people with co-occurring drug use and mention health difficulties can receive mental health cathe point of MAT delivery.		People have the right to ask for support with mental health problems and to engage in mental health treatment while being supported as part of their drug treatment and care.		engage in eing supported
Within East Lothian, as part of the Adult MH review, the interface between SUS and MH was identified as an area for improvement and this pathway is being reviewed and developed to			31 March 2023		
improve service delivery and access to MH care at point of MAT delivery.					
MAT Standard 10	All people receive trauma informed care.				
Continue to Implement	plan developed by NHS Lothian Clinical Psycholog	ıv as n	oted below:		
	to implement standard 10	,,			imescales complete

Establish required MAT 10 strategic leadership/steering group with appropriate membership and function	NHSL Clinical Psychology	Complete
Develop an overall MAT 10 delivery plan for Mid HSCP	NHSL Clinical Psychology	Complete
Develop service specific delivery plans for East Lothian HSCP (including a framework for evidencing and reporting implementation progress)	NHSL Clinical Psychology	31 Dec 2022
To carry out a baseline audit of current service delivery in relation to the key elements of Mat 6. This includes:	NHSL Clinical Psychology	
d) Staff survey e) Service user survey f) Trauma informed walk round – Esk Centre		Complete Dec 2022 31 October 22
initiate a process of continuous quality improvement underpinned by the principles of trauma informed care	NHSL Clinical Psychology	31 March 2023
Initiate a process where service users are continually asked for their views on service delivery and areas for improvement	NHSL Clinical Psychology	31 March 2023
Offer appropriate training supervision for all staff to work safely and effectively with trauma	NHSL Clinical Psychology	Complete
Develop a wellbeing planning tool and activities (e.g. staff mindfulness groups) to support staff health and wellbeing	NHSL Clinical Psychology	31 March 2023
Appropriate screening tools to be identified for use routinely (as appropriate) so that trauma is recognised	NHSL Clinical Psychology	31 March 2023

Develop resources (tools, manuals etc) to support staff to deliver MAT 6 psychosocial interventions	NHSL Clinical Psychology	31 Dec 2022
Establish a collaborative MAT 6 care planning process which has the service users' views at the centre.	NHSL Clinical Psychology	31 Dec 2022

Appendix 1: Key Delivery risks

Implementation, Performance management and governance

Implementing the plan requires rapid decision-making and sufficient management capacity to change services quickly. Mitigations for this risk will include strong management support and direct oversight by senior managers, incorporated into the monthly mangers meetings.

Workforce expansion and development:

The key professional groups needed to deliver the expansion plan are Mental Health Nurses, Prescribers (medical and non-medical) and recovery practitioners and Peer support workers and peer development peer workers. Mitigations for this risk might include engagement with wider workforce development processes within partner organisations, if recruitment poses challenges.

Premises and facilities

Challenges created by the current premises include:

 Insufficient office space for expanding staff and insufficient delivery space for patient numbers – limited room capacity restricts how flexible services can be (essential for our patient group)

Resources and capacity:

Although the recently allocated £224,500 (MIST £156.115 MELDAP £68,385) is a welcome expansion (and, as noted above, probably as large an increase in capacity as could be implemented immediately), it is not clear that this will be sufficient to relieve current pressures and meet increased expectations. Mitigation will require ongoing monitoring of progress and pressures.

Reporting and data gathering:

A system of quarterly reporting has been put in place. It requires evidence of continuous improvement toward MAT standards 1-5 and towards the target of increasing numbers of people in ORT. Mitigation would include investment in systems improvement and/ or admin attached to teams on a non-recurring basis. Potential addition of a data analyst within MELDAP to support

Inaccurate predictions of demand: the plan represents a significant lowering of the threshold for entering treatment. This is exactly the intended effect and is very necessary. However, there is the risk that improving access will result in greater numbers coming forward than can be safely treated. Conversely, the additional capacity may not result in additional presentations (risking inefficient use of resources and less public health impact). These risks have been mitigated by planning and will be carefully monitored, with additional measures to engage patients if needed.

National Care Service:

Consideration should be made in relation to the NSC Bill which is likely to be finalised in the summer in 2023 and how this may impact the delivery of local services and plans as the NCS is established.

Appendix 2: Summary of recruitment plans:

Permanent additional recruitment:

Professional group	Number to be recruited (WTE)
Expanding capacity B7 Clinical Nurse Specialist NMP Band 5 RMN MELD staff Band 3 admin	1 2 1.5 0.5

Additional non-recurring funding

All of the core posts are to be advertised through a single recruitment process (in each organisation) by September 2022, readvertised as needed in December 2022.

Additional non-recurring funding for staffing or other uses is available within the MELDAP budget. All partners, particularly East Lothian HSCP are able to have requests for this funding considered where it would achieve MAT standards.

Appendix 3: Summary of developmental/ QI projects:

All of these are to be delivered alongside the expansion of staffing numbers and reported through the ?

Key developmental projects:	Lead operational team(s) delivering	Lead QI support
Same day access	East SUS MELD	MIST
Implementation of the Buvidal pathway	EAST SUS	
Increasing capacity		
Improved throughput, case management and role delineation	EAST SUS MELD	MIST/ project manager
Improving access to physical healthcare for patients of the hubs	All teams	MIST

Appendix 4: Glossary of abbreviations:

Abbreviation	Description
CJ	Community Justice
DTTO	Drug Treatment and Testing Order
East SUS	East Lothian Substance Use Service
DBST	Dried Blood Spot Testing
ELHSCP	East Lothian Health and Social care Partnership
MELD	Mid and East Lothian Drugs
MELDAP	Mid and East Lothian Drugs and Alcohol Partnership
MIST	MAT standards Implementation Support Team (Public
IVIIGT	Health Scotland)
ORT	Opiate Replacement Therapy
QI	Quality Improvement
REAS	Royal Edinburgh and Associated Services
PCFT	Primary Care Facilitation Team
RGN	Registered General Nurse
RMN	Registered Mental Nurse

Lead Contacts of organisations involved in implementation:

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