

## MAT STANDARDS IMPLEMENTATION PLAN

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

Perth and Kinross

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

Name	Position
Kenny Ogilvy	ADP Vice Chair / Interim Head of Service – Adult Social Work and Social care

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:

*(Summary of governance arrangements for local oversight)*

This plan will be owned by the MATS project manager, reporting to the lead officer or deputy

This plan will be monitored, discussed and developed as necessary in conjunction with:

- ADP Strategy group
- ADP adult delivery Group
- P&K lived experience group

Progress against this plan will be reported within P&K integrated authority as necessary, which will include to:

- The Integrated Joint Board
- Health & Social care Management team






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

Name	Position	Delivery Partner	Date signed
Thomas Glen	Chief Executive	Perth & Kinross Council	16 <sup>th</sup> August 2022
Jacque Pepper	Chief Officer, HSCP	Perth & Kinross HSCP	31 <sup>st</sup> August 2022
Presented to meeting		Perth & Kinross Integrated Joint Board	31 <sup>st</sup> August 2022
Kenny Ogilvy	ADP vice chair / Lead Officer	Perth & Kinross Alcohol and Drug Partnership	31 <sup>st</sup> August 2022
Emma Fletcher	Director	Public Health for NHS Tayside	<i>Shared 25<sup>th</sup> November 2022</i>
Grant Archibald	Chief Executive	NHS Tayside	<i>Shared 25<sup>th</sup> November 2022</i>

### Version Control

Version Date	Updated by	Change summary
2022-08-10	Nick Morley	First version covering standards 1 to 5 only
2022-09-28	Nick Morley	Updates to standards 1 to 5 and addition of plan details for standards 6 to 10
2022-10-31	Nick Morley	Updates and a few minor changes to action wordings to improve clarity
2022-11-30	Nick Morley	Updates. Revision of std 8 tasks, addition of deliverable documents and updates on plan approvals

### RAG Key

Blue		Completed
Green		In progress with no significant issues or challenges
Amber		In progress with issues or challenges that are being managed or mitigated
Red		Not progressing due to significant issues or challenges that require resolution
Grey		Not started at this time

<b>MAT Standard 1</b>	<b>All people accessing services have the option to start MAT from the same day of presentation.</b>	This means that instead of waiting for days, weeks or months to get on a medication like methadone or buprenorphine, a person with opioid dependence can have the choice to begin medication on the day they ask for help.
September 2022 RAG status = Green		

<b>Actions/deliverables to implement standard 1</b>	<b>Timescales to complete</b>
---	-------------------------------

1.1	Develop and commence a test of change working initially on one day a week through IDART at Drumhar Health Centre (Perth City)		December 2022
1.2	Gather and analyse quantitative and qualitative feedback to enable the operating model to be further developed as necessary and agreed		Ongoing
1.3	Embed the agreed same day prescribing model, developed from the test of change, into Perth City normal operating procedures for all weekdays		March 2023
1.4	Develop and embed same day prescribing into rural areas, as necessary and within agreed constraints		March 2023
1.5	Develop ongoing reporting procedures of achievement of same day prescribing		March 2023
1.6	Deliverable: Document 1.1 – Documented pathway that meets the MAT standards criteria		January 2023
1.7	Deliverable: Document 1.2 – Standard Operating Procedure that meets MAT standards criteria		January 2023
1.8	Deliverable: Document 1.3 – Prescribing guidelines that meet MAT standards criteria		March 2023

<b>MAT Standard 2</b>	<b>All people are supported to make an informed choice on what medication to use for MAT and the appropriate dose.</b>	People will decide which medication they would like to be prescribed and the most suitable dose options after a discussion with their worker about the effects and side-effects. People will be able to change their decision as circumstances change. There should also be a discussion about dispensing arrangements, and this should be reviewed regularly.
September 2022 RAG status = Green		
<b>Actions/deliverables to implement standard 2</b>		<b>Timescales to complete</b>

2.1	Introduce a pathway to offer service users a community-based opiate detox programme	Completed
2.2	Complete training or validation for all IDART and substance use service staff to ensure that they are aware of the various treatment models	December 2022
2.3	Develop a pathway to inform and support service users making an informed, and agreed choice, about medication after considering methadone; buprenorphine or buvidal	December 2022
2.4	Complete training induction for appropriate new members of staff to enable them to support service users in making informed decisions on their medication	December 2022
2.5	Agree source and availability of ongoing funding to support medication options, which may become a constraint of choice for service users	March 2023
2.6	Develop a pathway for prescribing for service users transitioning into and out of HMP Perth	March 2023
2.7	Develop ongoing reporting procedures to reflect service users outcomes on their medication choice	March 2023

2.8	Deliverable: Document 2.1 – Prescribing guidelines that offer all choices of medication		March 2023
2.9	Deliverable: Document 2.2 – Home office licence or a standard operating procedure for named patient prescribing		November 2022

<b>MAT Standard 3</b>	<b>All people at high risk of drug-related harm are proactively identified and offered support to commence or continue MAT.</b>	If a person is thought to be at high risk because of their drug use, then workers from substance use services will contact the person and offer support including MAT.
September 2022 RAG status = Amber		

<b>Actions/deliverables to implement standard 3</b>	<b>Timescales to complete</b>
---	-------------------------------

3.1	Expand daily IDART staff huddle to include identification and monitoring of high-risk individuals		Ongoing.
3.2	Utilise the daily non-fatal overdose (NFOD) meeting to identify high-risk individuals that IDART should engage with		Ongoing.
3.3	Appoint a Tayside non-fatal overdose coordinator to monitor and chair NFOD meetings; review processes to identify inconsistencies or opportunities and undertake ongoing data analysis as well as other activities deemed appropriate to the role		Ongoing / in recruitment process
3.4	Engage with, and support, the Perth & Kinross mental health strategy group tasked to redesign primary care mental health services to ensure substance use services are part of an integrated pathway		See standard 7. To be confirmed, new project plan being developed
3.5	Complete a test of change of a referral pathway between IDART, mental health services and primary care		To be developed from 3.4
3.6	Gather and analyse results and qualitative feedback to enable the pathway to be further developed as necessary and agreed		Data requirements identified
3.7	Deliverable: Document 3.1 – Documented pathway that meets the MAT standards criteria		
3.8	Deliverable: Document 3.2 – Standard Operating Procedure that meets MAT standards criteria		

<b>MAT Standard 4</b>	<b>All people are offered evidence-based harm reduction at the point of MAT delivery.</b>	While a person is in treatment and prescribed medication, they are still able to access harm reduction services – for example, needles and syringes, BBV testing, injecting risk assessments, wound care and naloxone.  They would be able to receive these from a range of providers including their treatment service, and this would not affect their treatment or prescription.
September 2022 RAG status = Green		
<b>Actions/deliverables to implement standard 4</b>		<b>Timescales to complete</b>

4.1	Engage with and support as required, the Tayside wide group tasked with developing and implementing the necessary actions to ensure this standard is achieved		March 2023
4.2	Ensure the Tayside wide actions align with Perth & Kinross requirements and resources		March 2023
4.3	Deliver BBV / harm reduction awareness training to all IDART staff		Training delivery underway
4.4	Obtain and issue carry on packs (harm reduction packs) for all IDART staff		Awaiting delivery of the packs
4.5	Train staff on AIR (assessment of injecting risk) tool and recording on NEOL (needle exchange online)		To be completed once packs available
4.6	Deliverable: Document 4.1 - Local protocol to enable core harm reduction services at the same time and place as MAT and OST delivery		
4.7	Deliverable: Document 4.2 - Training plan delivered to ensure all staff offering MAT and OST can provide the core harm reduction services at the same time and place as MAT and OST delivery		
4.8	Deliverable: Document 4.3 – Evidence of a system to record the delivery of core harm reduction services at the same time and place as MAT and OST delivery		

4.9	Deliverable: Document 4.4 – Evidence or confirmation that all the equipment (needles, syringes, filters, foils, naloxone etc.) and documentation required to provide core harm reduction services readily available in all rooms where MAT or OST are offered		
4.10	Deliverable: Document 4.5 – Evidence of controls to ensure an appropriate quantity, range and size of needles, syringes and equipment available so the correct equipment is used for each injection according to drug, injecting site and individual preference		



<b>MAT Standard 5</b>	<b>All people will receive support to remain in treatment for as long as requested.</b>	A person is given support to stay in treatment for as long as they like and at key transition times such as leaving hospital or prison. People are not put out of treatment. There should be no unplanned discharges. When people do wish to leave treatment, they can discuss this with the service, and the service will provide support to ensure people leave treatment safely.
September 2022 RAG status = Green		
<b>Actions/deliverables to implement standard 5</b>		<b>Timescales to complete</b>

5.1	Introduce regular review meetings for IDART service users with their identified key worker		Ongoing
5.2	Incorporate discussions at the multi-disciplinary meeting for service users, when appropriate for them, to agree the ongoing supports that best provide for the needs of the individual		Ongoing
5.3	Incorporate case load review at supervision meetings for IDART staff		December 2022
5.4	Review and improve pathway for service users leaving IDART that identifies and signposts them onto appropriate supports		No primary care support available
5.5	Deliverable: Document 5.1 – Documented pathway or models of support that meets the MAT standards criteria		
5.6	Deliverable: Document 5.2 – Standard Operating Procedure that meets MAT standards criteria		

<b>MAT Standard 6</b>	<b>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.</b>	This standard focuses on the key role that positive relationships and social connection have to play in people's recovery. Services recognise that for many people, substances have been used as a way to cope with difficult emotions and issues from the past. Services will aim to support people to develop positive relationships and new ways of coping as these are just as important as having the right medication.
September 2022 RAG status = Green		

<b>Actions/deliverables to implement standard 6</b>	<b>Timescales to complete</b>
---	-------------------------------

6.1	Invite Psychology attendance at the ADP strategy group meetings		Ongoing
6.2	Invite Psychology attendance at the ADP adult delivery group meetings		Ongoing
6.3	Appoint a Psychology assistant to support improvement work and improve access to psychology interventions		In recruitment process
6.4	Support as required, the Tayside lead clinician for drug & alcohol recovery, in developing a pilot of computerised CBT type interventions for both, anxiety/low mood and specific substance/alcohol related intervention		Discussions ongoing with the Scottish Government lead for digital mental health
6.5	Psychology develop and implement evidence-based team interventions or support for staff wellbeing		
6.6	Have clear pathways in place to ensure that service users can access higher intensity psychological therapies and follow on from lower intensity pathways		Established pathways to be reviewed

6.7	Deliverable: Document 6.1 - Documented service plan for delivering Tier 1 psychologically informed care and Tier 2 low-intensity psychological interventions (Criteria 6.1)		
6.8	Deliverable: Document 6.2 – Evidence of a steering group that oversees the implementation of these plans (Criteria 6.2)		

<b>MAT Standard 7</b>	<b>All people have the option of MAT shared with Primary Care.</b>	People who choose to will be able to receive medication or support through primary care providers. These may include GPs and community pharmacy. Care provided would depend on the GP or community pharmacist as well as the specialist treatment service.
September 2022 RAG status = Red		
<b>Actions/deliverables to implement standard 7</b>		<b>Timescales to complete</b>

7.1	Develop a mental health and substance use service that is wrapped around primary care		
7.2	Identify change requirements to inform a delivery plan		To be informed by 7.1
7.3	Implement an ongoing communication process to inform primary care about MAT standard plans and progress		
7.4	Deliverable: Document 7.1 - Documented protocol(s) in place to share care between specialist services, GP and community pharmacies for people who are on MAT (criteria 7.1b) OR evidence of a steering group established to oversee the development and implementation of drug treatment in primary care		
7.5	Deliverable: Document 7.2 - Documented pathways in place that enable the transfer of appropriate elements of care between specialist, mental health, GP and community pharmacy services		

<b>MAT Standard 8</b>	<b>All people have access to independent advocacy and support for housing, welfare and income needs.</b>	People have the right to ask for a worker who will support them with any help they need with housing, welfare or income. This worker will support people when using services, make sure they get what best suits them and that they are treated fairly.
September 2022 RAG status = Green		
<b>Actions/deliverables to implement standard 8</b>		<b>Timescales to complete</b>
8.1	Establish independent advocacy Perth & Kinross (IAPK) with a remit to support to service users directly or by signposting to other appropriate supports	Established September 2020
8.2	Review the IDART referral pathway's to increase awareness of Independent Advocacy PK and ensure that all IDART staff are aware of this service	December 2022
8.3	Engage with, and support, the Mental Health Triage project with the process design to ensure that IAPK is included in the options for support for service users being reviewed at the daily meetings	December 2022
8.4	Identify existing referral and support services for housing needs. Develop ongoing awareness training for delivery to IDART staff	February 2023
8.5	Identify existing referral and support services for welfare advice. Develop ongoing awareness training for delivery to IDART staff	February 2023
8.6	Identify existing referral and support services for income needs. Develop ongoing awareness training for delivery to IDART staff	February 2023
8.7	Deliverable: Document 8.1 – Evidence that independent advocacy services are commissioned or engaged with locally	
8.8	Deliverable: Document 8.2 – Confirmation or evidence that staff have access to training to understand the role of independent rights-based advocacy and health inequalities training	

<b>MAT Standard 9</b>	<b>All people with co-occurring drug use and mental health difficulties can receive mental health care at the point of MAT delivery.</b>	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.
September 2022 RAG status = Amber		
<b>Actions/deliverables to implement standard 9</b>		<b>Timescales to complete</b>
9.1	Appoint a social worker with experience or special interest of Mental Health into IDART	Now in role
9.2	Develop awareness training for IDART staff and supporting partner services, on mental health issues and supports available to service users	In early stages but see 9.3
9.3	Engage with, and support, the Perth & Kinross Multi Agency Mental Health triage project in developing a test of change for a daily meeting to identify the best support provider for people with an identified need	Triage project developing operating model
9.4	Engage with, and support, the Perth & Kinross mental health strategy to redesign the mental health service so it is integrated with substance use services and wrapped around primary care	See standard 7. To be confirmed, new project plan being developed
9.5	Deliverable: Document 9.1 - Documented service implementation plan that includes the MAT criteria in MENTAL HEALTH services	
9.6	Deliverable: Document 9.2 - Documented service implementation plan that includes the MAT criteria in SUBSTANCE USE services	
9.7	Deliverable: Document 9.3 – Documented pathways in place to support any identified mental health care needs across the ROSC and clear governance structures to establish effective joint working arrangements to care for people with co-occurring mental health and substance use	

<b>MAT Standard 10</b>	<b>All people receive trauma informed care.</b>	<p>The treatment service people use recognises that many people who use their service may have experienced trauma, and that this may continue to impact on them in various ways.</p> <p>The services available and the people who work there, will respond in a way that supports people to access, and remain in, services for as long as they need to, in order to get the most from treatment. They will also offer people the kind of relationship that promotes recovery, does not cause further trauma or harm, and builds resilience.</p>	
September 2022 RAG status = Amber			
<b>Actions/deliverables to implement standard 10</b>			<b>Timescales to complete</b>
10.1	Support Tayside Drug & Alcohol Psychology Service to develop and implement a pathway that includes Trauma informed group work		
10.2	Support Tayside drug & alcohol psychology service to develop and implement a pathway for one-to-one psychology therapy interventions		
10.3	Undertake assessment of substance use service premises to ensure they are fit for purpose and identify any necessary remedial works for progression		Limited space in Drumhar / building issues to resolve
10.4	Deliverable: Document 10.1 – Evidence of a plan in place for delivering trauma informed care that considers the 5 key drivers for organisational change recognised by NHS Education for Scotland		
10.5	Deliverable: Document 10.2 – Evidence of a steering group to oversee the development and implementation of trauma informed care across MAT services		