

## **EAST AYRSHIRE COUNCIL**

**SOCIAL WORK COMMITTEE : 18 MAY 2006**

### **DRAFT NATIONAL QUALITY STANDARDS FOR SUBSTANCE MISUSE SERVICES**

#### **Report by the Executive Director of Educational and Social Services**

#### **1. PURPOSE OF REPORT**

- 1.1 To inform Social Work Committee of the recent consultation by the Scottish Executive on proposed quality standards for substance misuse services during the Scottish Executive review of drug treatment and rehabilitation services in 2003, the lack of agreed quality standards in substance misuse services emerged as a major issue.

#### **2. BACKGROUND**

- 2.1 In order to raise the level of care provided to substance misuse services in Scotland, Scottish ministers have proposed national care standards for a wide range of care services involved in providing support to substance misusers.
- 2.2 A steering group was thereafter established by the Scottish Executive in order to begin the development of a workable framework of quality standards that will extend to all types of services for problem drug and alcohol users since there all already exists National Care Standards for Care Homes for People with Drug and Alcohol Misuse Problems.
- 2.3 The steering group developed 11 overarching standards each with its own set of underpinning statements. These standards and underpinning statements are the subject of the consultation and are attached as appendix 1.

#### **3. PROGRESS IN EAST AYRSHIRE**

- 3.1 An extensive consultation exercise has been undertaken in East Ayrshire involving staff, team managers as well as partners in health, police and the voluntary sector.
- 3.2 From this consultation, a response to the Scottish Executive's consultation was formulated and is attached as appendix 2.

#### **4. SUMMARY OF MAIN ISSUES RAISED IN CONSULTATION**

- 4.1 Participants involved in the consultation recognised the person centred nature of the standards but felt that the focus was on the adult to the detriment of any child in the family of a problem drug/alcohol user.

- 4.2 Consultees requested the inclusion of an additional standard relating specifically to the protection of the children of problem drug/alcohol users
- 4.3 Consultees did not feel that the proposed standards were in keeping with the continuous improvement element of Best Value enshrined in the Local Government in Scotland Act 2003 since the standards are not aspirational enough.
- 4.4 The Consultees were uncertain how the standards are to be monitored since there do not appear to be any outcome measures.
- 4.5 There was also concern among participants in the consultation that the standards did not appear to link to any other monitoring framework such as those standards already in place from Care Commission, Social Work Inspection Agency or clinical governance within NHS.
- 4.6 Consultees did not feel that the proposed standards were comprehensive enough to bring about substantial quality improvements.

## **5. POLICY/LEGAL IMPLICATIONS**

- 5.1 None.

## **6. FINANCIAL IMPLICATIONS**

- 6.1 Improving quality is central to the local authorities commitment to Best Value and continuous improvement substance misuse services will be expected in the short term to implement any quality improvement scheme from within existing resources, however it is expected that in the longer term that additional resources will be required in order to fully implement all the proposed standards. At this stage we are unable to quantify this required additional resource.

## **7. COMMUNITY PLANNING IMPLICATIONS**

- 7.1 As substance misuse services within East Ayrshire are integrated into the Community Planning structure, the proposed draft national standards will fit with the Improving Health theme and Community Safety theme of the Community Plan.

## **8. RECOMMENDATIONS**

- 8.1 Social Work Committee is asked to:-
  - (i) note the content of the Scottish Executives consultation on the proposed draft national quality standards for substance misuse services. Copies are available in the members information point;

- (ii) agree the response to the consultation on the proposed draft national quality standards for substance misuse services as attached at appendix 2; and
- (iii) otherwise note the contents of the report.

**Graham Short**  
**Executive Director Educational and Social Services**  
**LW**  
**02/05/06**  
**Enc (2)**

### **LIST OF BACKGROUND PAPERS**

1. Proposed draft national quality standards with underpinning statements
2. Officer compiled consultation response on proposed draft national quality standards.

For further information please contact:  
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**IMPLEMENTATION OFFICER: JACKIE DONNELLY**

### **Standard Statement 1**

**You will be provided with all the information you need to help you decide about using the service.**

You, or someone acting on your behalf, will be:

- provided with **clear and correct** information on **all** the support available;
- provided with information on getting help from **the service** – such as contacting and getting to it;
- provided with details of who the service is for and what it offers; and
- provided with details of its rules and ways of working. For example confidentiality, sharing information and making a complaint.

### **Standard Statement 2**

**You will be able to access safe, quality surroundings when engaging with the service.**

- The service and facilities offered will be of a good standard – safe and appropriate.
- The service will employ and train its staff to make sure you are treated with respect and dignity.
- The service will seek to ensure that bullying, harassment or discrimination of any kind is not tolerated.
- The service will respect and actively support your religious, spiritual, cultural and other beliefs and needs, and those of others who use the service.

### **Standard Statement 3**

**You will be involved in a full assessment which makes sure that decisions about your care and support are based on your needs.**

- You, or someone acting on your behalf, will take part in a full assessment of your drug and/or alcohol use and other needs and it will be kept up to date.
- Improving your situation will involve discussing areas in your life such as your health, employment, housing, family and children.
- Your views will be heard and used to develop your personal plan.
- With your agreement, your information will be shared with other services and it will be made clear to you when this might be done without your permission.

### **Standard Statement 4**

**You will receive a written personal plan that clearly sets out the service that will be provided to meet your needs.**

- After assessment you will be involved in developing your personal plan.
- Who does what and when will be made clear in your personal plan which will be kept up to date.
- As your situation changes, your personal plan will be reviewed to reflect these changes.

### **Standard Statement 5**

**The service will work with you to achieve the jointly agreed actions in your personal plan.**

- You will be informed about what the service offers, how it can help and how to take part.
- You will have time to think about your choices.
- You will be offered a supportive working relationship to help meet your needs.
- You will be supported to meet your needs in the personal plan.
- You will be helped to find ways to avoid future problems with drugs and/or alcohol.
- You will work together with the service to make sure that there is a joint responsibility for meeting your needs.

### **Standard Statement 6**

**You will be able to discuss and plan your long-term support with service staff, involving your family, other organisations, services or representatives as appropriate.**

- From the start, the service will work with you to help you achieve your future goals.
- The service will help with all parts of the plan such as identifying personal strengths and maintaining positive relationships.
- You and the service will work together to make helpful contacts before you leave.

### **Standard Statement 7**

**You will receive quality support and care.**

- If you have needs the service cannot meet, appropriate professional help will be sought.
- The service will meet relevant legal requirements.
- Workers (paid and unpaid) will be appropriately trained and supervised.
- The service will continuously review how it meets your needs and how it could be improved.

### **Standard Statement 8**

**The service will work with a wide range of partners, including other services, so that your needs are met.**

- Funders and providers will jointly design services that meet local requirements and national plans and will ensure they work together in a co-ordinated way.
- Funders and providers will ensure that evidence-based best practice is used to inform service design and delivery.
- Local services will be able to meet the needs of specific groups, for example parents with children, women, young people, minority ethnic groups and those with mental health needs.
- Services will consult with other agencies, such as housing and employment, when appropriate, to meet your needs.
- All drug and alcohol specialist services will have clearly written service specifications.

### **Standard Statement 9**

**The service you receive has been designed with you, your family, and the needs of the local community in mind.**

- The service will treat **everyone** fairly in the way they work.
- To offer the best help with your changing situation **all** services will work together.
- How the local community are involved with the service will be clearly laid out.
- The service will recognise the needs of members of your family and those you live with and, where appropriate, seek support for them.

### **Standard Statement 10**

**Your views will be sought in order to constantly monitor the type, delivery and development of services.**

- You will be given a list of your rights and responsibilities when using a service.
- To improve this service, at least once a year, you will be asked in confidence for your views and ideas on the service.
- To improve this service, at least once a year, other local organisations will be asked in confidence for their views and ideas on the service.
- If you want to join a group with others using services then you will be given support and training to do so.

### **Standard Statement 11**

**You will have all the information you need about arrangements for ending your contact with the service.**

- If you have children, this service will not ask you to leave without considering their needs.
- When about to leave the service other agencies may **have** to be informed, particularly if you have children.
- You will be given useful information such as how to get extra help or cope with a risky situation or setback.
- The service will talk with you about **all** the choices and risks faced by you and others.
- Before leaving you will be asked for your views of the service.
- The service will send a report on your progress to appropriate agencies.
- The service may ask if they can keep in touch to see how you are doing.

### Substance Misuse Quality Standards Consultation Response Form

<b>1. Are the standards and underpinning statements applicable to all types of services for substance misuse?</b>	
Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
If no, what could be done to make them more relevant?	

<b>2. Do all the standards and underpinning statements apply to both drug and alcohol services?</b>	
Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
If no, please identify which, and why you think this	

<b>3. Are they sufficiently comprehensive? Please select appropriate</b>	
Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
We require clarity about the children of drug/alcohol users in order to ensure that substance misuse services provide quality services to children affected by their parents/carers use of alcohol/drugs. We suggest an additional standard.	

<b>4. How completely do you think working to the standards will achieve the aim of improving service quality and delivery? Please select appropriate</b>			
Fully <input type="checkbox"/>	Mostly <input type="checkbox"/>	Partly <input checked="" type="checkbox"/>	Not at all <input type="checkbox"/>
Have you any suggestions as to how they could be improved?			
We believe that in order to fully address increased service quality and standards there requires to be additional resources specifically allocated to services to enable them to do this.			
We further note that as well as resources there needs to be a range of quality indicators developed that would allow for measurement of improvement in service quality and delivery			

**5. Is there sufficient emphasis in the draft standards on the responsibilities of the service user?**

Whilst these standards are obviously developed with the service user at the forefront, we would have liked to see some recognition of the 2 way process involved in the provision of quality service

**6. How easy do you think services will find them to implement in the immediate future? Please select appropriate**

Very Easy       Easy       Difficult       Very Difficult

Can you identify what difficulties they are likely to face with implementation?

We suggest that there needs to be a programme of training and development put in place to support services with implementation.

However, this programme of training and development is no use without some measurable outcomes as services need a framework to work to that will allow them opportunities to benchmark themselves.

We wonder also how rural and remote services will be able to comply with standard 2 regarding facilities since very often these services rely on goodwill from partners and provide services on an outreach basis very often utilising community centres, church halls, G.P surgeries etc.

**7. How easy do you think services will find them to implement in the long term? Please select appropriate**

Very easy       Easy       Difficult       Very Difficult

Can You identify what difficulties they are likely to face with implementation?

We are unable to select a response to this question since the implementation in the long term will depend on available resources, support and training as well as a definition of 'long term'

**8. How would you propose monitoring their implementation?**

Monitoring would be done via quality indicators which may include service user views.

In order to ensure consistency, it is important that monitoring is built into existing inspection systems such as the Care Commission, SWIA, Local Authority systems and clinical governance within health and that this is properly co-ordinated.

**9. What could be done at a national level to support you in the monitoring process?**

In order to monitor there needs to be a set of quality indicators. If these key performance indicators were developed and agreed at a national level then those who monitor could benchmark their local services with similar services across Scotland

**10. Do you have any further comments?**

- i. In consulting with partners and stakeholders we were unable to determine how Scottish Executive defined quality. Some guidance on what quality means in terms of drug and alcohol services would have been useful
- ii. Are there proposals to develop a set of audit tools to aid those that monitor local services measure quality and performance
- iii. Key to many of the standards is information sharing. We suggest that there needs to be a separate and clear standard for the sharing of information

