

MAT STANDARDS IMPLEMENTATION PLAN

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

Fife Alcohol and Drug Partnership

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

Name	Position/Job Title
Nicky Connor	Fife IJB Chief Officer

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)

The plan was developed in partnership with three subgroups of Fife ADP, the MAT Standards Implementation and Oversight Group, the MAT Standards Trauma Informed and Psychological Workforce Development group and the Lived Experience Panel. Subsequent reporting against the plan will adhere to this arrangement. The plan was ratified at the ADP Committee where both the IJB Chief Officer and IJB Chief Finance Officer are members. Following this, the plan adhered to governance arrangements within the Local Authority and Fife NHS.

G	ON TRACK
A	SOME ISSUES
R	SERIOUS ISSUES

MEDICATION ASSISTED TREATMENT (MAT) STANDARDS – FIFE ADP IMPROVEMENT PLAN 2022-23

MAT STANDARD

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

Deliverables agreed with PHS by end of 2024	What we've achieved end of 2021/22?	MIST Aim 2022/23	Timescale	MIST Actions 2022/23	Lead Initials	Status	Q1 Progress Update (Apr 22 to Jun 22)	Q2 Progress Plan (Jul 22 to Sept 22)	Q3 Progress Plan (Oct 22 to Dec 22)	Q4 Progress Plan (Jan 23 to Mar 23)
<p>Same day prescribing will be available in Levenmouth (Methil) and other high-risk areas for all referral routes overseen by the MAT Standards subgroup building on the existing model in place for the Rapid Access Clinic Kirkcaldy.</p> <p>Stepdown clinic established and operational for patients requiring infrequent and less intensive support.</p>	<p>33 people presented for treatment within the pilot clinic in Kirkcaldy.</p> <p>Between July and September 2021, at least 50% (n=6) of those people received their first prescription on the same day and 75% (n=8) within a day.</p> <p>Between Oct to Dec 2021, those figures were one day (n=11) and two days (n=17) respectively.</p>	Implement a further test of change for MAT standard 1 in Methil.	Commence in August 2022 and report on the first quality improvement cycle in December 2022, demonstrate full implementation by April 2023.	<p>Complete a MIST quality improvement charter for Methil Drop in.</p> <p>Document pathways and procedures for the test of change establish systems for the collection of numerical and experiential data to evaluate the test of change (e.g., audit).</p> <p>Recruit or allocate additional prescribers in the substance use team to the test of change and include third sector partners including We Are With You.</p>	Dr Susanna Galea-Singer	Amber	<p>Since March 2022, there has been an established drop in/open access café in Methil Community Centre. Supported by ADAPT, Phoenix Futures, Scottish Families Affected by Alcohol and Drugs. This has engaged with 14 people on average each week. Supplied THN advice and equipment, supported those with MH issues and 5 have been triaged into Tier 3 treatment and support. Services based in the community (Foodbank, the Well, Kingdom Housing) refer into this drop in. NHS Addiction nursing support will commence next quarter but prescribing at the site will not be available until Q3 due to late allocation of funds.</p>	<p>Recruitment for additional medical prescribers to offer same day prescribing at Methil Drop in.</p> <p>Clinical support via use of "Near Me" with third sector support from Restoration established at the Kennoway/Buckhaven recovery café and provision of prescribing later that day if required/clinically safe to do so.</p> <p>Commence training for NHS teams and ADAPT in experiential data collection for the test of change.</p> <p>Quality improvement charter completed.</p> <p>Draft Rapid Access Clinic SOP developed.</p>	<p>Experiential and numerical data to be collated and to inform further development of the test of change at Methil and Kennoway/Buckhaven.</p> <p>Continual monitoring by operational teams reporting to the ADP MAT Standards oversight group. Remedial and escalation processes followed.</p>	<p>Analysis of drug related deaths and NFO data completed and next community based drop in identified from this. Planning to commence with HSCP Locality board and ADP and community based partners.</p>

MAT STANDARD

2 - All people are supported to make an informed choice on what medication to use for MAT, and the appropriate dose

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<p>Buvidal will be extended from two sites and a treatment room will be established in a third static site.</p> <p>Stronger links and co working with new adult support and carer's service – families will be part of care plans and significant increases in family inclusive practise and approach will be realised.</p>	<p>By December 2021, 17 people across the full patient caseload were prescribed Buvidal.</p> <p>NHS Addictions has draft SOP in place with Specialist Pharmacist in Substance Misuse and the electronic prescribing system has now been updated to include buvidal. Treatment room has been costed and being pursued for the third static site which will facilitate buvidal treatment for patients nearer to their home. Feedback on patient/family members experience of Buvidal is planned.</p> <p>Buvidal has been offered in the community nearer patients homes.</p>	Implement a test of change for MAT standard 2 to increase the uptake and delivery of long-acting injectable buprenorphine.	Commence in August 2022 and report on the first quality improvement cycle in December 2022, demonstrate full implementation by April 2023.	<p>Complete a MIST quality improvement charter.</p> <p>Document pathways and procedures for the test of change.</p> <p>Establish systems for the collection of numerical and experiential data to evaluate the test of change (e.g., audit).</p> <p>Recruit or allocate additional prescribers in the substance use team to the test of change and include third sector partners including We Are With You, ADAPT for the near fatal overdose service and access clinics, Barnardo's and Clued Up for the Whole Family Support and Young People Service, Fife Intensive Rehabilitation Substance Use Team for their CORRA funded Thrive Service, Scottish Families Affected by Drugs Adult Family Support and Carers' Service.</p>	Dr Susanna Galea-Singer & Sarah MacFarlane	Green	<p>Buvidal is now available in the 3 static sites but not offered at the Rapid Access Clinics. This is a clinical decision made by clinical team but will be reviewed as buvidal prescribing increases.</p> <p>Most documented procedures are in place to support static site provision.</p> <p>Recruitment of additional prescribers has commenced.</p> <p>Planning meetings in place with third sector partners to develop pathways for test of change, though unclear if this is really needed given the rapid progression of this improvement.</p> <p>Workshops to train third sector partners about new medication and to prepare patients might be a better task.</p>	<p>Buvidal is not offered in the 70 satellite sites due to the NHS Fife policy safe and secure use of meds requiring two registrants to be present. Policy amendment sought and will complete this quarter.</p> <p>Buvidal has been offered in the community nearer patients homes.</p> <p>NHS Addictions and NHS Pharmacy services are seeking an amendment to this policy and following appropriate governance.</p> <p>National Experiential and local managers' meeting planned.</p> <p>Development of NHS Addictions dashboard or data from Nebulla system can monitor progress on a quarterly basis.</p> <p>Plans for workshops to be developed.</p> <p>Discussions with central team as quality improvement charter might not be required for this standard.</p>	<p>Roll out of buvidal should commence in satellite sites.</p> <p>Data system in place to capture numbers of people on buvidal contrasted with other medications across the system.</p> <p>Experiential data capture commenced by NHS Addictions Team to evidence levels of medication choice for people entering and currently in the service/system of care.</p>	Review of progress and improvement plans in development for next year.

MAT STANDARD

2 - All people are supported to make an informed choice on what medication to use for MAT, and the appropriate dose

3 – All people at high risk of drug-related harm are proactively identified and offered support to commence or continue MAT

8 – All people have access to independent advocacy and support for housing, welfare and income needs

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<p>Prioritisation for NFO and rapid reengagement for those coming through the retention service.</p> <p>Prioritisation for those coming via A&E, hospital liaison, custody suites (nurses and SACRO project).</p> <p>Rapid Access Clinics will be used for titration and retitration, follow up in place and sharing information across third sector.</p> <p>Referrals directly from primary care and pharmacy for those who have not attended for their medication</p> <p>Prison liberation and those fleeing DV and referrals from psych wards will be given prioritisation.</p>	<p>Assertive outreach services (custody suites, prison, homeless hostels, hospital wards, A&E) are in place and assertive outreach approach embedded within all ADP services. There is documented flow chart to allow a variety of different strategies for those already in treatment including a 'red, amber, green' system and home visits for most at risk.</p> <p>Community pharmacy also raise an alert for people who do not attend for medication to allow a fast track approach back into services with support from retention team.</p> <p>There are information sharing agreements in place between multi agencies and between Scottish Ambulance Service/territorial health board/ADP/third sector for the non-fatal overdose project.</p>	Implement further test of change for MAT standards 2, 3 and 8 in justice settings across Fife and share learning.	Commence in August 2022 and report on the first quality improvement cycle in December 2022, demonstrate partial or full implementation by April 2023.	<p>Collaborate with justice partners and Angus, Perth and Kinross, Dundee ADP areas and share learning from the justice work already undertaken in Fife ADP area.</p> <p>Conduct mapping of the MAT standards in Fife justice settings and initiate systems to link in with test of change work for MAT standards 1 and 2 across the local pathways that link prison, police custody and the community. This would aim to be a national pilot of a local network approach, and coordinate with the multiagency work already started to look at how the prison to community pathway can be strengthened (MAT 2, 3 and 8 to be agreed).</p> <p>Ensure sufficient process, numerical and experiential evidence to demonstrate progress.</p>	Dr Susanna Galea-Singer & Elizabeth Butters	Amber	<p>Rapid Access Clinic in Kirkcaldy is used to rapid reengagement into the Addiction Service from both retention service and hospital liaison service.</p> <p>Pathways from SACRO and Phoenix Futures into Tier 3 support developed but not specifically for MAT 1 and 2.</p> <p>Mapping of MAT standards in criminal justice not yet complete but ADP complying with national approach.</p> <p>Meeting planned with MIST Team and NHS Addictions to develop a dashboard for progress measures.</p> <p>MAT 1 nor 2 not delivered in custody suites within Fife though Custody Health care predicts 18 people per quarter would be eligible. ADP uses third sector navigation service to link to NHS Addiction Services' community teams.</p>	<p>Pathways/prioritisation to be developed from criminal justice (SACRO navigators project).</p> <p>Mapping to commence with CJSW, Police, Prison & Custody Healthcare, Community Safety Partnership and third sector partners.</p> <p>Advocacy service to reach quarterly target and learning reported to ADP and CORRA Foundation.</p> <p>ADP commitment to national programme and development of ISP protocol to proactively identify and respond to those benefitting or potentially benefitting from MAT within the Community Justice system.</p>	<p>Mapping to be completed and pathways/prioritisation for those in CJ to be developed to Rapid Access Clinics.</p> <p>NHS Addictions dashboard to report on MAT numerical measures completed.</p>	Review of progress and improvement plans in development for next year.

MAT STANDARD

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

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<p>Test of change work to ensure Harm Reduction/Triage and NHS services funded by the ADP have access to BBV testing as standard, with funded services having access to NEO to record transactions and reports to consider gaps and learning.</p> <p>Use of Near Me technology with BBV/Sexual Health Team mobile unit and NFO Team – with links again to standard 1 - 5.</p> <p>Test of change work to consider peer naloxone in Levenmouth – with pathways to identify those at risk of harm requiring treatment (standard 1 and 3) and be linked to the Levenmouth Rapid Access Clinic.</p> <p>All staff in NHS will provide IEP/THN & BBV testing and support for treatment.</p>	<p>All services are trained in providing harm reduction as part of their comprehensive assessments and a process is in place to record this via Needle Exchange Online. NHS services signpost to We Are With You, or pharmacy, for injection equipment, but due to budgetary constraints, some services have difficulty accessing and providing this. Not all services provide dry blood spot testing and oral fluid tests, though NHS, harm reduction and assertive outreach teams do. People are signposted to primary care and other vaccination providers for vaccinations. All services are trained in the use of Take Home Naloxone.</p> <p>A fully established retention service with further funding for continued development Follow up and active reengagement approaches for those at risk of unplanned discharge across all services with evidenced success in third sector.</p>	Scale up the MAT standards 1-5 in the community.	Commence in August 2022 and demonstrate full implementation of standards 1-5.	<p>Collaborate with national thematic groups.</p> <p>Establish scale up plans for all standards. Specific components for scale up include: improve capacity and the retention in services by continuing to support models of care creating further capacity, with an opioid substitution therapy stepped care model, pharmacy prescribing, advanced nurse prescribing.</p> <p>Practitioners within the third sector to support those who are lower risk to create and manage capacity, is an option (MAT standard 5).</p>	Dr Susanna Galea-Singer	Amber	<p>Collaboration with national groups in place.</p> <p>Secured additional ADP two-year funding for ADAPT retention service linked to NHS Addictions to prevent early unplanned discharge from ORT treatment.</p> <p>Provision of COVID vaccinations for care group and families provided at 15 community pharmacies across Fife. This was a partnership between ADP/NHS Pharmacy Services/ Public Health and lived experience panel. Promoted to all ADP services and support provided to individuals to attend.</p> <p>SACRO & ADAPT providing additional direct support to care group to attend vaccination centres.</p> <p>Rapid Access Clinics being used for reiteration and rapid reengagement.</p>	<p>Establishment of Harm Reduction/THN/BBV subgroup with key partners to improve training, distribution, testing and access within ADP services.</p> <p>NHS Addiction Service to conduct feasibility study for supply of IEP to existing patients during routine appointments.</p> <p>Review of Take Home Naloxone provision in Fife across ADP services.</p> <p>Plan and submission of new numbers in ORT treatment target (154) for Fife over next two years, to be completed and returned to Scottish Government.</p> <p>Recruitment of prescribing staff to commence and continue.</p>	<p>Plans to improve BBV testing within NHS Addictions Service developed? and data collection added to new NHS Addictions dashboard.</p> <p>Review of ORT treatment target for Q1 of the year. Remedial action to commence if not achieved.</p> <p>Models to be considered and discussed to create additional capacity in NHS teams with third sector support.</p>	Review of progress and improvement plans in development for next year.

MAT STANDARD

6 – The system that provides MAT is psychologically informed (tier 1); routinely delivers evidenced-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

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<p>Establishment of ADP Workforce development group to focus on improvements for MAT 6 & 10.</p> <p>Test of change for primary care/NHS Addiction nurse liaison service.</p> <p>Establishment of advocacy service for people with lived/living experience of substance use delivered by people with lived experience.</p> <p>Mental health care at point of delivery.</p>	<p>Training needs assessment completed on ADP workforce and plan developed.</p> <p>Funding not available for development of MAT 7.</p> <p>Funding secured from DDTF team, commissioned by ADP with Circles Network and operational for start of April 2022.</p> <p>Improvement plan not yet developed.</p> <p>Training needs assessment completed on ADP workforce and plan developed.</p>	Scale up the MAT standards 6-10 in the community.	Commence in August 2022 and at least partial implement of standards 6-10 by April 2023.	<p>Provide structured psychological interventions (tier 2) to address mild to moderate comorbid mental health issues and to support people's recovery from substance use.</p> <p>Enhance support and training for psychologically informed treatment and trauma-informed care. The ADP area have a subgroup to oversee delivery of this standard and can feed progress back nationally (MAT standard 6 and 10) establish a system that offers people the option of MAT shared with primary care (MAT standard 7).</p> <p>Continue to develop and provide rights-based advocacy support to people in treatment by commissioning dedicated advocacy input (MAT standard 8).</p>	Dr Isabel Traynor & Elizabeth Butters	Amber	<p>ADP subgroup has met and agreed workplan for MAT 6&10. Though budget is not allocated to this work, the tier 1 and tier 2 training will continue to be embedded in NHS Addictions. Funding has been allocated from CORRA to continue to improve psychological interventions in FIRST.</p> <p>ADP Service Manager recruited to project lead on this development.</p> <p>Advocacy service established and people with lived experience recruited. In first quarter service has seen 7 individuals to provide support.</p> <p>Increased investment into recovery groups with new groups now in Kennoway and Buckhaven planned for next quarter.</p> <p>Established Methill drop in engaging with</p>	<p>Linked into national groups and scoping required with HSCP primary care colleagues.</p> <p>Development of pathways from housing, welfare and income services into ADP support commenced. Including links to housing first model.</p> <p>Consider funding model required for psychology tier 1 and 2 training plan (MAT 6 & 10) across ADP workforce.</p>	<p>Tier 1 and tier 2 psychology continued with NHS Addictions and/or other ADP service.</p> <p>Plan and/or commissioning developed with third sector to support Housing First model.</p> <p>Commence mapping for possible nursing/consultant led primary care liaison test of change in Fife and consideration of funding model.</p>	Review of progress and improvement plans in development for next year.

				<p>Continue to improve access to recovery groups and peer support.</p> <p>Continue to provide access to family and carer support and share any learning nationally.</p>		<p>7 – 42 people in the area.</p> <p>Family Support and Carers Service established with targets for one to one and group work support.</p>			
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