

Delivering care together

Minutes of North Ayrshire Strategic Planning Group Meeting Held on Tuesday 8 August 2023, 2:00pm Harbourside Hall, Fullarton Connexions, Irvine

Present:

Joyce White (Chair)

Councillor Margaret Johnson

Scott Bryan, Strategic Planning, Policy, and Inequalities Officer, NAHSCP

Lindsay Murphy, Health Improvement Lead, NHS AA (for Elaine Young)

Peter McArthur, Senior Manager - Addictions, NHS AA

Nicola Fraser, Interim Programme Manager Transformation

Scott Hunter, Chief Social Work Officer, NAHSCP

Louise McDaid, Staff Representative & North Coast Locality Lead

Vivian Forbes, Property Services Programme Manager

Paul Doak, Head of Service (Finance and Transformation), NAHSCP

Sharon Hackney, AHP Senior Manager, NAHSCP

Roseanne Burns, Senior Manager, Justice Services, NAHSCP

Betty Saunders, Contract and Commissioning Manager, NAHSCP

Jennifer McGee, Planning Officer, NAHSCP

Apologies Received:

Thelma Bowers, Head of Service, Mental Health & Learning Disabilities, NAHSCP Julie Barrett, Senior Manager, Mental Health Services, NAHSCP

Elizabeth Stewart, Interim Head of Service, Children's Health, Care & Justice Services

Darren Fullarton, Associate Nurse Director, NAHSCP

Sam Hodkinson, Partnership Engagement Officer

Vicki Yuill, Arran CVS and Arran Locality Lead

Elaine Young, Public Health Representative

Allison McAllister, Library & Information Manager, NAC

Elaine McClure, Portfolio Programme Manager, NHS A&A

Fiona Comrie, KA Leisure

Alison Sutherland, Head of Service, Children's Health, Care & Justice Services

Michelle Sutherland, Interim Senior Manager, Primary Care and Communities, NAHSCP

Neil McLaughlin, Performance & Planning, Health and Community Care

Robert Martin (Vice Chair)

Billy Brotherson, Independent Chair of ADP

Councillor Anthea Dickson, Provost, NAHSCP

Caroline Cameron, Director, NAHSCP

Michael McLennan, Partnership Engagement Officer

Morag Henderson, Consultant Psychiatrist/ Clinical Director, NHS

Helen Gourlay, NHS Healthcare Improvement

Rosemary White, Lead Officer, ADP, NAHSCP



Delivering care

		together		
Item	Item	Action		
1.	Welcome and Introductions			
1.1	Joyce White opened the meeting by welcoming all in attendance. Apologies were noted and accepted.			
2.	Minutes of Meeting held on 23 rd May 2023			
2.1	The minutes from the previous meeting dated 23 rd May 2023 were agreed as an accurate reflection of discussion.			
	It was noted that another event is planned in relation to the suicide prevention work and the Creating Hope strategy continues to be developed.			
Focus on: Matters Arising				
3.	Locality Conversation Model – Update Scott provided the group with an update on the Locality Conversation Model and noted this will be taken to PSMT in November then IJB and SPG in January.			
	A two-step approach has been taken via feedback and ongoing engagement, with 2 conversations planned per year. There will be 6 Locality Review Groups (one for each locality) which will review the feedback from the conversations and identify areas for action. The chair/lead will feed in to the SPG. There was a discussion around whether the chairs of the review groups could be Team Managers or Service Managers from the Partnership who would be familiar with the issues within the locality areas. Paul noted a TOR is being developed for these groups. It was agreed training for chairs would also be helpful.			
	Scott noted the groups will be established in September and will feed back to the SPG within the next 12 months. Scott noted the Performance Team will also attend the group meetings to collate feedback.			
	It was agreed it would be important to ensure we reach the active groups in the community and involve them in the conversations.			
3.a.	Scheme of Integrations Update Scott provided the group with an update on this work and noted there was a discussion at the previous meeting. It has been 5 years so it is likely the review will need to be updated. Feedback was gathered from managers who have agreed this is required so the review will now go ahead. HSCP and Council Chief Officers will agree what this will look like, what the workstreams will be and will begin this work in the next few months.			
Focus on: MAT Standards				
4.	Medicated Assisted Treatment (MAT) Standards Peter McArthur attended today's meeting and provided an overview of the MAT Standards work. Peter noted that reducing drug-based harm			



Delivering care together

and deaths is one of the main areas of concern which the Scottish Government has identified to reduce.

There are 10 standards currently in place which are:

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

Peter noted the focus over the last year and a half has been on developing standards 1 to 5, and work will take place to embed and sustain these over the next few months.

A test of change took place in the Three Towns Resource Centre which proved this work can be delivered safely and, in a recovery,-focused way. Work will now be started to determine how this can be scaled up.

Peter provided the group with some statistics for information:

- There were 376 referrals for MAT assessment within the last year.
 - 326 of these commenced MAT support (the others disengaged with services, declined support or were provided with different support)
 - 236 (72%) commenced on the same or next day
 - 24 (7%) commenced within 2 to 4 days
 - 20 (6%) commenced within 5 to 7 days
 - 50 (15%) commenced more than 7 days (likely due to disengagement/ difficulties making contact etc.)

Peter noted service user and staff feedback so far has been gathered and submitted to the MAT Standards Implementation Support Team (MIST).



Delivering care together

4.a. Discussion

Betty queried whether this work has had a positive impact on staff, for example, with job satisfaction/ wellbeing. Peter noted a lot of staff are very positive about this work and this has also been added to the health & wellbeing agenda. There have however been some concerns noted by staff around the definitions being changed which has cause some frustration as reporting/ recording needed to be updated to reflect this.

Paul queried what the outcomes have been for service users and noted the positive numbers of people commencing treatment quickly. Peter noted quick access is a protective factor, especially for people with chaotic lifestyles as this can reduce the risk of drug related deaths. Support is provided in a trauma-informed way so people will also be given links to welfare/ housing information etc. The 2022 data on drug related deaths is expected in the next few months. It is likely there will not be a significant reduction, but the service hopes the numbers will not have risen much. The service has also received good feedback from service users and this work also allows for a quick response to child/ adult protection concerns.

Joyce noted that there is a perception that the third sector is being overlooked within this work, and queried how we measure the success of this work within reporting. Peter noted third sector services are part of the pathway through the MAT Standards, and less severe or vulnerable cases would be signposted through third sector away from NADARS which deals with the more severe cases. It was noted that ADP reps are supporting third sector colleagues with accessing funding and other supports.

It was agreed that the ask of this group is to ensure we are challenging stigma and promoting the work of the services and inclusivity of the locality areas.

Joyce thanked Peter for today's update and noted the group looks forward to future updates on this work.

Focus on: Strategic Planning Group – Terms of Reference

5. SPG Terms of Reference – Overview

Scott provided the group with an update and noted the previous terms of reference were updated in 2018. Scott went through the layout of the plan and noted there are some concerns around gaps in the group membership. There are a few vacancies and some members do not regularly attend the meetings.

5.a Discussion

Joyce noted she will share the updated terms of reference with **Board members** for awareness.

J White



Delivering care together

	It was agreed version numbers should be added to the terms of reference going forward. It was agreed that the layout of the report should more reflect the layout in today's presentation which is easier to read and understand. It was also agreed that staff names should be removed, with just job titles noted. Scott will arrange for the report to be updated.	S Bryan	
	It was agreed it would also be useful to hold a workshop once the posts are identified and filled to agree important areas of work and what is expected of the group. Jennifer McGee noted she can support Scott with this.	S Bryan/ J McGee	
Focus on: Engagement			
6.	Caring for Ayrshire – Information Leaflet The leaflet was noted by the group. Scott noted the driver for this work is to move service users aware from acute services into community services where possible. It was noted that engagement work is ongoing, and the group are asked to share the leaflet with their services for awareness. Vivian noted funding has been reduced significantly which is affecting delivery. It was agreed it would be useful to seek updates from GPs in relation to this work and an update on the Primary Care Improvement Plan, and Vicki Campbell should be invited to a future meeting to provide an update. It was also agreed that it would be useful to ensure the Clinical Director attends these meetings as he could provide updates on this work going forward.	L McCleish L McCleish	
Future Meetings			
7.	Future Agenda Items - C&F Safe & Together		
8.	Date of Meetings 2023 ○ Tuesday 3 rd October 2023, 2pm – 4pm ○ Tuesday 5 th December 2023, 2pm – 4pm		