Justice Committee

Transfer of prison healthcare to the NHS

Written submission from NHS Forth Valley

Forth Valley Drug and Alcohol Integrated Pathway 2012 – Background Information

Following the transfer of healthcare from the Scottish Prison Service (SPS) to the NHS in November 2011 NHS Forth Valley have been working in partnership with Forth Valley Alcohol and Drugs Partnership (FVADP), managers from within the SPS setting and more recently with the Acting Assistant Director of Health and Care, to develop appropriate pathways for those in prisons who require support with alcohol and /or drug (including tobacco) addiction.

The main focus at transfer was to resolve any urgent matters that operational staff had with the prisoner care i.e. continuity of treatment regimes. These issues were recognised at a development day, staff from community and SPS setting were able to discuss and debate processes, seeking solutions where problems were identified. An action plan was subsequently developed and sub-groups convened, in the main those issues that were raised have been resolved.

There are some areas which still require more work i.e. drug testing guidelines, protocols etc. All of these have been transferred to the work plan of Forth Valley Treatment Services, Integrated Clinical Governance Group (ICGG). This group straddles both statutory and third sector provision; NHS prison healthcare staff are members of this group. The main focus of the ICGG work plan is to support the delivery of evidence based treatment interventions, service improvement, and monitor the overall governance and quality of the Forth Valley substance misuse treatment system.

More recently FVADP received an allocation from the Scottish Government to support the delivery of alcohol interventions within the three FV establishments; this focussed us on reviewing the available evidence from published research and the recent assessments that have been undertaken of prisoner need, including our local FV needs assessment for alcohol and drugs. From the evidence available we have worked in partnership to develop a pathway for alcohol and drug treatment and support. It is envisaged that the pathway will deliver a care planned person centred approach to treatment. This work is currently at the ‘draft’ stage.

It is anticipated that any future contract that NHS Forth Valley put in place within the SPS setting, would seek to improve the assessment process overall and support the delivery of a recovery focussed treatment pathway, which will emulate those interventions currently available in the Community. Forth Valley recently shared the draft pathway work at a national event hosted by NHS Health Scotland.

In addition we are currently developing the framework to capture outcomes data from those interventions currently delivered within the SPS setting.
Measuring the waiting time for drug and alcohol treatment has also been a focus; this remains a priority area for improvement work. A recent waiting time improvement event was attended by all NHS healthcare staff who work within the SPS setting. Forth Valley has significantly improved data quality and compliance, and will continue to work on recording all the treatment modalities which are included in the HEAT A11 target, which is designed to ensure faster access to drug and alcohol treatment in Scotland.

We have a complete overview of the Forth Valley ‘naloxone’ programme, capturing all activity within the SPS setting within one data collection system. NHS Forth Valley, in partnership with FVADP plans to take a whole system approach to reviewing the circumstances relating to any drug related death that may occur within the SPS setting. In addition we are currently developing the framework to capture outcomes data from the interventions delivered within the SPS setting.

It is our intention to report the SPS substance treatment expenditure alongside the global Forth Valley Community Substance Misuse Services, currently reported to FVADP, to support the review of all resources in this area ensuring treatment modalities are cost effective, efficient and sustainable.

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