

A Recovery Orientated System of Care for Ayrshire and Arran

1. BACKGROUND

- 1.1 The national alcohol and drug strategies, 'Changing Scotland Relationship with alcohol' and 'The Road to Recovery' signalled a change in national strategic direction for those with alcohol and other drug problems from targets which measured engagement and maintaining people in treatment to recovery focused person centred outcomes. The Alcohol and Drug Strategic Leads Group had concerns that the current model of service provision, particularly for individuals with alcohol and drug problems, was unsustainable over the long term.

It was within the context of the above that the Model of Care short life working Group was convened to review service provision and develop a proposal which would deliver on both of the above. Research and robust discussion resulted in a proposal which went out for consultation through the Alcohol and Drug Partnerships. Following the submission of comments which were considered by the Alcohol and Drug Strategic Leads Group this final document was signed off on 18 February 2011.

2. RECOVERY ORIENTATED SYSTEM OF CARE OF AYRSHIRE

- 2.1 Scottish Government defines recovery as *"a process through which an individual is enabled to move on from their problem drug use, towards a drug-free life as an active and contributing member of society...[and] is most effective when service users' needs and aspirations are placed at the centre of their care and treatment"*.

- 2.2 The strategic vision for Ayrshire is:-

Recovery is possible and at the centre of all services we provide.

People will own their own recovery and service staff will facilitate their recovery journey.

People in recovery will support others along the path to recovery.

- 2.3 Description of the Ayrshire and Arran ROSC

The ROSC system refers to the macro-level organisation of the larger cultural and community environment in which long-term recovery is nested and offers a complete network of formal and informal resources that support long-term recovery of individuals and families. This is well suited to the asset based community development approach as a ROSC depends on and needs the input of peers and support within communities.

The ROSC supports person-centered and self-directed approaches to care that build on the strengths and resilience of individuals, families, and communities to sustain personal responsibility, health, wellness and recovery from alcohol and drug problems. This is done by providing a comprehensive menu of services and supports that are neither linear nor sequential and can be combined and readily adjusted to meet the individual's needs and chosen pathway to recovery. The experiences of those in recovery, and their family members contribute to the ongoing process of systems-improvement.

2.4 Systems of care elements of the Ayrshire and Arran ROSC

The Ayrshire and Arran ROSC will offer a menu of comprehensive person-centred services which are individualised, stage-appropriate, needs led, and flexible throughout the recovery process. Systems will adapt to the needs of individuals, rather than requiring individuals to adapt to them.

The Ayrshire and Arran ROSC will emphasis strengths, assets and resiliencies within individuals and encourage people to use personal and social strengths to 'live well' in the presence or absence of problems of all sorts.

The Ayrshire and Arran ROSC will encourage a linguistic shift from an emphasis on morbidity to one emphasising health and strength and a belief of positive change and hope.

The Ayrshire and Arran ROSC will encourage people to learn how to manage problems in the context of an empowered self and community rather than being defined either by the problem itself or by the services set up to help with the problem.

The Ayrshire and Arran ROSC will encourage a shift from an individual and substance based understanding to one that has its basis in social networks

Services within the Ayrshire and Arran ROSC will have strong links and joint working protocols with a wide variety of both non specialist non health related services and community groups

The Ayrshire and Arran ROSC will includes peer recovery support services, individuals with personal experience of recovery provide these valuable services. Assertive linkage between treatment services and communities of recovery are key.

The Ayrshire and Arran ROSC will acknowledge the important role that families and other allies can play and they will be incorporated when appropriate in the recovery planning and support process.

The Ayrshire and Arran ROSC will incorporate the experiences of those in recovery and their family members in the ongoing process of systems-improvement.

The Ayrshire and Arran ROSC will be culturally sensitive, competent, responsive and aware of recovery language. There will be a recognition that beliefs and customs are diverse and can impact on the outcomes of recovery efforts.

The Ayrshire and Arran ROSC will respect the spiritual, religious and/or secular beliefs of individuals and will ensure recovery option linkages are in place that are consistent with these beliefs.

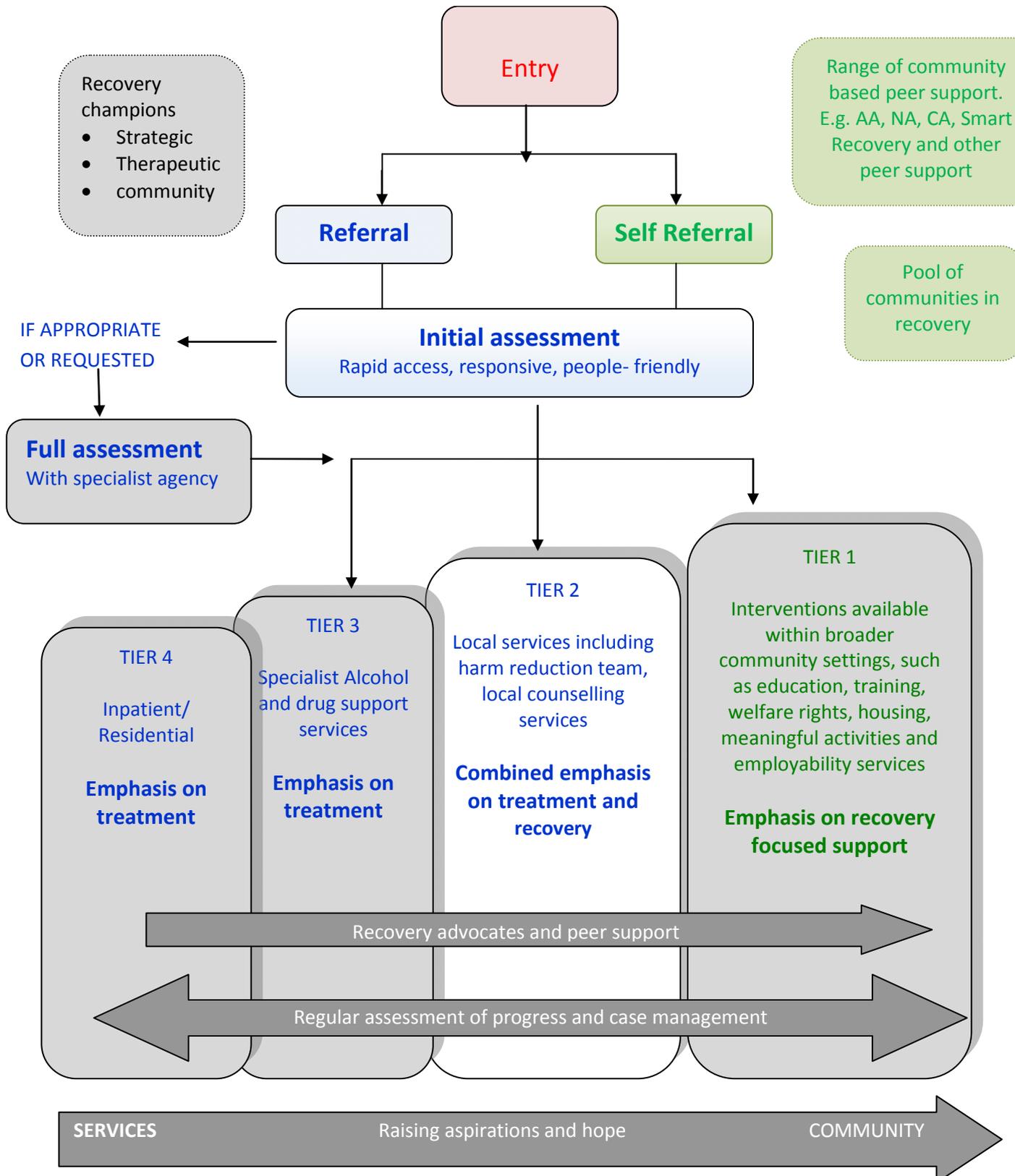
The Ayrshire and Arran ROSC will focus on collaboration, rather than hierarchy between professional and client. The ROSC systems is designed to ensure individuals feel empowered to direct their own recovery with safety being a paramount concern.

The Ayrshire and Arran ROSC will offer a continuum of care, including pre-treatment, treatment, continuing care and recovery support. Individuals will have a full range of appropriate services from which to choose at any point in the recovery process. Ongoing monitoring and feedback with assertive outreach to promote re-engagement will be put in place as required.

The Ayrshire and Arran ROSC will be anchored in the community for the purpose of enhancing the availability and support capacities of families, social communities, community-based services and other communities in recovery. In turn a strengthening community will benefit from owning the ROSC and from a sense of 'giving back' from recovering individuals

The Ayrshire and Arran ROSC development will be informed and underpinned by research which could include research on individuals in recovery, recovery venues and the processes and phases of recovery, including cultural and spiritual aspect and including research on the social networks in which individuals live. This will also be informed by service user views and the experiences of people in recovery.

2.6 The model below represents the entry into the ROSC for support and treatment for alcohol and other drug related problems.



Model above adapted from design by Lanarkshire ADP and used with kind permission.

2.7 With this shift in conceptual parameters the Ayrshire and Arran ROSC can usefully produce outcomes which might easily translate to ADP and community partnership planning. These might include

- Noticeable and measurable improvements in the quality of life
- An understanding that there will also be beneficial impacts on families and social networks
- A well developed diversity of options for service users
- The development of the principle of 'giving something back' to the community that has empowered service users, and
- An understanding that the long term goal is to reach a 'tipping point' beyond which individuals and communities are strengthened and empowered in ways that significantly reduce future problems

2.8 Outcomes delivered by the Ayrshire and Arran ROSC

Reduction in injecting equipment sharing and blood born virus's

Stabilisation, reduction in alcohol and drug use and moving toward abstinence

Improved general health and mental health

Improved family relationships and parenting

Reduction in harm to children affected by parental substance use

Improved life circumstances ie housing, employability

Improved and increased social networks including networks of people in recovery

Reduction in criminal and anti-social behaviour