

**addaction** Herefordshire |

## Progress to date

- TOPS sit at 100% completion for start, review and exits
- Risk and Recovery Plans are 100% complete
- Representations remain low across the cohorts
- Strong upward trajectory for successful completions

# Performance

**Top Quartile for successful completions for opiates in our comparator grouping. We have risen from a position of 33<sup>rd</sup> out of 33 to a position of 7<sup>th</sup> out of 33 in this cohort within our comparator LA.**

	Bassline Period		Direction of Travel	Latest Period		Top Quartile range for Comparator LA's	Range to achieve top Quartile
	%	N		B	%		
Opiate	2.4%	11/454	^	8.3%	37/445	8.21% - 9.52%	37-42
Non opiate	38.1%	24/63	^	42%	21/50	48.92% - 63.38%	25-31
Alcohol	28.1%	61/217	^	33.2%	79/238	*39.87%	-
Alcohol & non opiate	26.1%	12/46	^	29.1%	16/55	41.74% - 52.25%	23-28

## Continued Improvement – Performance Focus

- Audits by team leads of casenotes, needs assessments, risk and recovery plans
- Clear targets for TOPS completion, risk assessments and recovery plans for each staff member
- Continued engagement with staff team with regards to performance trajectories including display of these in office space and review at team meetings
- Continue to target service users nearing the end of treatment with additional support to enable transition into recovery support and out of structured treatment
- Addressing those who are 'stuck' in treatment with a focus to encourage individuals to make small positive changes and address anxieties about ending formal treatment
- Clear and time bound pathways for new entrants into treatment

## Continued Improvement – Community/Recovery focus

- Clearer links with HSUG in order to provide greater recovery support network
- Development of greater support for AA/NA groups
- CJIT group provision for DRR & ATR SU's
- Continued presence within the court system
- Further development of Addactions group provision to enhance recovery community within Hereford
- Development of co-production panels to ensure greater understanding and support from the local community
- Focus upon volunteers and peer mentors to engage with group work programme
- Link working with SMART UK

## Service Development From April 2018

- Staff capacity will be more restricted following a review of the annual contract value undertaken by the council. This will have the following impacts;
- CJIT – 1 worker – group based DRR/ATR with POD testing once a month by CJIT staff member
- YP – 1 worker - Time bound and structured care – setting a specific length of time to work with Sus dependant upon need
- Leominster – 1:1 & group provision offered
- Ross/Ledbury – fortnightly presence with groups accessible at Hereford & Ross
- Hereford – 1:1 & group provision offered
- Shift towards 80% group work – clearer pathways towards time bound structured treatment
- Reduced NX opening – based on trend analysis
- Reduced outreach programme – increased education to referrers to ensure continued referrals alongside increased advertisement of service via leaflets and handouts
- Hand collection of prescriptions to ensure continuation of safe prescribing
- No rehab budget available
- Reduced inpatient detox