

DAT ASSOCIATION REMOTE & RURAL COMMUNITIES SUB-GROUP

Wednesday 29th September 2004, 1000

held at Stirling Council Chambers, Old Viewforth, Pitt Terrace, Stirling

Present:

Liam Wells, Forth Valley SAT [Chair]
Linda Bates, DAT Association Administrator [minutes]
Iain Guthrie, Dumfries & Galloway ADAT
Marie Hayes, Lanarkshire ADAT
Angus MacKay, Western Isles ADSAT
Joni McArthur, West Lothian DAAT
Davie McCue, Effective Interventions Unit, Scottish Executive
Julie Murray, Borders DAAT
Ian Smillie, Perth & Kinross DAAT
Hilary Smith, West Lothian DAAT
Anni Stonebridge, Aberdeenshire ADAT
Karyn Tait, Orkney DASAT
Justine Walker, DAT Association National Officer

Apologies:

Grace Ball; Margaret Birrell; Suzy Calder; Liz Coates; Eric Corstorphine; Grahame Cronkshaw; Jackie Davies; Pat Greenhough; Maggie Jamieson; Rita Keyte; Marion Logan; Stevie Lydon; Fiona MacKay; Hannah Muldoon; Catriona Oxley; Jim Parker; Donna Reid; Fraser Ross; Patricia Russell; Ruth Shepherd; Iain Turnbull

1. Welcome and Apologies

Liam welcomed all to the meeting, and stated that today's field trip would now take place at 1130 [not 1100 as stated on the Agenda]; apologies were as listed above.

2. Minutes of Previous Meeting [30th June 2004]

The minutes of the previous meeting were accepted as accurate.

3. Matters Arising

Regarding identification of information sharing items for Association website [item 4, page 2], Justine reported that there have been delays in getting information uploaded via ISD onto the website; this may be partly due to the significant increase in the amount of data that the Association is now wanting to be placed on the website. Justine hopes to have further discussions with ISD to formulate the best way forward in this matter. With particular reference to Liam's request that local DATs send on any relevant information for website posting to the Association, Linda reported that to date only Borders and West Lothian DATs had submitted documents. Liam reiterated his request that other DATs follow suit, where appropriate.

Regarding the Perth & Kinross draft prescribing protocol [item 5, page 3], Ian Smillie reported that the document was still under discussion at local level, and had not yet been officially approved. Once it has been ratified, he shall forward it to the Association for posting on the website.

Regarding the web forum for rural and remote communities [item 8, page 4], Justine requested that this item be more fully discussed on today's Agenda under AOB.

4. Feedback from Internet Approaches Seminar, 28th September 2004

Justine reported that the previous day's seminar on Internet Approaches to Treatment and Support had been most successful, and had produced very useful general discussion [speakers included Professor David Clark of WIRED, and Ian Semel of Distance Therapy]. It was felt by attendees that support provided via the internet might be most effective when linked with existing services; it might also be possible to incorporate this kind of 'virtual' outreach as part of local strategies for related areas [e.g. employability]. David Clark had had discussions with Colin Cook at the Scottish Executive regarding the possibility of using the internet for treatment and rehabilitation; Justine stated that Colin was keen to take it forward as an issue. Justine proposed that a letter to Colin Cook be written by the Association on behalf of DATs, indicating a willingness to support pilot projects across Scotland; this was supported by the members present.

action: JW

It was agreed that the points of contact for any ongoing discussions between the Scottish Executive and the Association would be Liam Wells and Anni Stonebridge.

Davie McCue suggested that the Effective Interventions Unit be used to conduct, commission and project manage any pilot scheme that might be agreed.

5. Report on the work from Effective Interventions Unit [EIU]

Davie McCue of the Effective Interventions Unit [EIU] at the Scottish Executive presented an update on work currently being undertaken by his department, to examine issues regarding planning, design and delivery of integrated care in remote and/or rural areas [Appendix 1]. Anni Stonebridge and Liam Wells are currently on the steering group, working with Davie on these issues; an inaugural meeting has already taken place. Additionally, four DAT areas [Dumfries & Galloway; Forth Valley; Highland; Orkney] have been selected to participate in a qualitative study, undertaken by ClearPlan UK on behalf of the EIU, the results of which should be published by the EIU in early 2005. Although the timescale for the study is quite short, Davie is confident that it shall be sufficiently detailed to be of value for the EIU's work programme; if the quality of the content is compromised by the timescale constraints, it shall be reviewed.

Davie also provided details of two forthcoming Consultation Seminars on Rural and Remote Areas, due to take place on Thursday 7th October in Stirling and Tuesday 19th October in Inverness [Annexes 1 and 2]; Anni Stonebridge shall be speaking at both events to discuss the internet potential. Davie believes that the seminars have the potential to be a very important part of information and evidence gathering, to illicit the views of practitioners in the field, and to use their feedback to inform the content of further investigation for the EIU. Invitations have been extended to about 900 stakeholders within the substance misuse field in Scotland; Davie encouraged any interested parties [including DATs and their partner agencies] to attend either of these events.

A general discussion was held regarding Davie's request that DATs respond to a questionnaire that the EIU hope to send to all Teams; it was suggested that a telephone survey might be the best way to guarantee responses. Concerns were raised regarding the specificity of questions [i.e. who would the target audience be; would the questions be geared towards Remote and Rural DATs, or would they be more general?]; one way of getting round this problem might be to

devise two separate questionnaires – one for Remote & Rural, and one for City DATs. It was agreed that a timescale of four weeks would be suitable for DATs to respond to any written questionnaire.

6. Good Practice in Access to Services

Anni Stonebridge requested that other DATs contact her to share examples of good practice in their locality [e.g. how to change the flow of service users from rural areas to cities]. Ian Smillie stated that Perth & Kinross are de-centralising services away from Dundee [e.g. needle exchanges are provided by Harm Reduction, who have teams in each area to respond to local needs]; he shall discuss this further with Anni. It was suggested that building good links with Community Health Partnerships and Specialist Pharmacists might be a way forward with such issues. Justine stated that she can provide Anni with the names of Specialist Pharmacists around Scotland, who might be able to help further. **action: JW**

7. Any Other Business

A general discussion was held regarding the desirability and feasibility of having a web forum [hosted by ISD] for use by DAT teams across Scotland, as a means of encouraging information exchange between members. It was suggested that this might require a behavioural change amongst participants [i.e. encourage people to 'check in' on a regular basis], and would need commitment from members to actively use the service. Two recommendations were made by members:

- (i) that there be a structured pilot scheme where members sign up to make a minimum commitment to using the forum; and
- (ii) an email digest [of all recent and/or relevant topics] be prepared by a moderator, which would get issued to all those signed up to participate.

It was agreed that Justine shall contact DATs by email to progress this issue further, and to seek nominations for a potential moderator of a pilot forum. **action: JW**

Regarding the Remote & Rural sub-group, it was recommended that a Vice Chair be appointed; Anni Stonebridge was nominated by Justine Walker [seconded by Ian Smillie], and was duly installed as Vice Chair of the sub-group.

8. Date of next meeting

The date of the next meeting shall be timed to coincide with the next full Association meeting [after today]; Linda shall advise members once a date has been agreed. **action: LB**

ADAT RURAL AND REMOTE AREAS SUB GROUP MEETING

STIRLING, 29 SEPTEMBER 2004 – UPDATE ON EIU GUIDE

1. Background

As part of the EIU's work programme for 2004/05, we are examining the issues that influence the planning, design and delivery of integrated care for drug users in rural and remote areas. This study will build on some of the findings presented in *Integrated Care for Drug Users: Principles and Practice* (EIU, 2002). That document and subsequent EIU reviews identified some specific issues involved in the delivery of services to drug users, and barriers to accessing services encountered by drug users in rural and remote areas.

Integrated Care highlighted the importance of providing accessible services for drug users. Factors influencing accessibility will affect, and in some cases determine, the extent to which integrated care can be delivered in any area.

To make services accessible, it is essential to remove the barriers, real and perceived, that individual's experience. *Integrated Care* identified a number of factors that may affect accessibility for people in rural and remote areas. These include the following:

- the location of services, and logistical problems in travelling to services
- cultural barriers to travelling to services in different areas
- the range of accessible and available local services
- maintaining anonymity in small communities

Following completion of the evidence gathering, the EIU will publish a document setting out the evidence about service provision for drug users in rural and remote areas, and about effective approaches to address these issues.

2. Defining Rural and Remote Areas

What do we mean by rural Scotland?

Defining 'rural and remote areas' is not straightforward! The Scottish Executive's has updated its Urban Rural Classification which provides a definition of rural Scotland that is agreed by Ministers and is widely used across the Executive. This was formerly known as the Scottish Household Survey Urban Rural Classification but has been renamed the Scottish Executive Urban Rural Classification in recognition of its widespread use across the Executive and its agencies.

Rural Scotland is defined as **settlements with a population of less than 3000**. We further understand the differences between remote and more accessible rural areas by classifying settlements as:

Remote rural – those with a greater than 30 minute drive-time to the nearest settlement with a population of greater than 10,000

Accessible rural – those with a 30 minute or less drive-time to the nearest settlement with a population of greater than 10,000

Other definitions related to rural areas and settlements are used (General Register Office for Scotland, Randall, Henderson).

3. Methods of Gathering Evidence

The EIU will use a variety of methods to gather evidence for the document. These include **(3.1-3.6)**:

3.1 EIU Rural and Remote Areas Reference Group

A reference group has been established incorporating broad membership. The agreed remit of the group is:

‘To examine and identify the factors that influence effective commissioning, planning and delivery of integrated care for drug users in rural and remote areas; and to offer information and advice to support the EIU review’.

3.2 Literature Review

A literature review is being conducted. Although there is worldwide literature on this theme, there seems to have been little published literature in Scotland. It is known that the following research/studies have been undertaken in Scotland:

- Scottish Drug Forum’s Report on Young People in Oban.
- Various reports by The Department of Sparsely Populated Areas in Aberdeen University.
- Work in progress by the National Treatment Agency in England regarding equality and diversity issues for drug users.
- Neil McKeganay’s study on young people in Angus.
- Work done on homelessness in Dumfries and Galloway.
- Work done in the Borders on children affected by substance misuse.

3.3 Qualitative Research

Following open tender, the EIU have commissioned Clear Plan UK Ltd to carry out the qualitative research phase of the evidence gathering process.

Study aims and objectives

The overall aim of the qualitative study is to identify and investigate the issues that influence the effective planning, design and delivery of integrated care for drug users in rural and remote areas, from the perspectives of service planners, service providers and service users.

The objectives of the study are to identify and explore the following:

- Barriers to accessing appropriate services for drug users in rural and remote areas.
- Other issues affecting service provision for drug users in rural and remote areas.
- Ways of overcoming barriers to accessing services in rural and remote areas.
- Examples of effective and innovative practice in the planning and delivery of services to drug users in rural and remote areas.

Four DAAT areas have been selected, namely Dumfries and Galloway, Forth Valley, Highland and Orkney Islands. It will not be possible to provide information that is fully representative of all rural and remote areas in Scotland. The research Report will be completed by early December 2004 and will inform some of the content of the EIU document.

3.4 Consultation Seminars

The EIU is to hold two half-day consultation seminars on 7 October 2004 and 19 October 2004 (**see Annexes 1 and 2 for draft programmes**). The aims of the events are based on seeking practical examples of the key issues and factors that influence the commissioning, planning, and delivery of integrated care for drug users in rural and remote areas; in addition to looking for examples of good and/or innovative approaches you employ locally to overcome these barriers. Examples of these can be sent to us prior to the event but the programme has been designed to maximise the opportunity for interactive discussions on the day.

3.5 Visits to services

An attempt will be made to visit a few projects that provide services for substance misusers.

3.6 Questionnaire to DAATs

An option for *discussion* at the ADAT meeting on 29 September 2004 is whether there would be added value if the capacity existed to survey all DAAT support teams (a representative from each) using a simple questionnaire, whilst acknowledging that 4 DAAT support teams are taking part in the qualitative research whilst 2 other DAAT support teams are represented on the EIU reference group (from the ADAT sub group).

4. Issues specific to the planning and delivery of services for drug users in rural and remote areas.

From preliminary examination of the literature and from discussions at the inaugural EIU reference group meeting, the following important points can be highlighted. Whilst acknowledging that there are a number of positive factors for commissioners, service providers and service users in rural and remote, a number of issues exist. These include:

- Definition
- Unwillingness to accept problems
- Accessibility
- Geography
- Transport
- Financial resources
- People resources
- Treatment options and equity
- Competencies, training and development
- Confidentiality
- IT and communications
- Needs assessment

5. Projected timescales

It is planned that the document will be published by January 2004. The literature review is due to be completed by the end of October and the qualitative research by the beginning of December 2004.

Effective Interventions Unit

29 September 2004

Annex 1

EFFECTIVE INTERVENTIONS UNIT

CONSULTATION SEMINAR ON RURAL AND REMOTE AREAS

THURSDAY 7 OCTOBER, SCOTTISH FURTHER EDUCATION UNIT, STIRLING

Draft Programme

- 09.15 Registration and refreshments
- 09.45 Welcome and Introduction (Patricia Russell)
- 09.55 Developing the evidence base for integrated care in rural and remote areas (David McCue)
- 10.10 Introduction to Workshops (Emma Harvey)
- 10.15 Workshop 1
- 11.10 Break
- 11.30 Examples of effective and/or innovative practice (speaker to follow)
- 11.45 Workshop 2
- 12.35 Feedback from workshops (Facilitators)
- 12.50 Summary, next steps and close (David McCue)
- 13.00 Lunch

Draft Questions for Workshop

Workshop 1

- What are the specific issues and other factors that effect the treatment, care and support for drug users in rural and remote areas?
- How do these impact on the ability of agencies/service providers to commission, plan and deliver integrated care?

Workshop 2

- What has to be in place to implement integrated care in rural and remote areas?
- What are agencies/service providers currently doing in terms of planning and delivery of care?
- Are there local examples of good and/or innovative approaches you can share?

Annex 2

EFFECTIVE INTERVENTIONS UNIT

CONSULTATION SEMINAR ON RURAL AND REMOTE AREAS

TUESDAY 19 OCTOBER, ROYAL HIGHLAND HOTEL, INVERNESS

Draft Programme

- 12.30 Registration and refreshments
- 13.15 Welcome and Introduction (Patricia Russell)
- 13.25 Developing the evidence base for integrated care in rural and remote areas (David McCue)
- 13.40 Introduction to Workshops (Emma Harvey)
- 13.45 Workshop 1
- 14.40 Break
- 15.00 Examples of effective and/or innovative practice (speaker to follow)
- 15.15 Workshop 2
- 16.05 Feedback from workshops (Facilitators)
- 16.20 Summary, next steps and close (David McCue)
- 16.30 Lunch

Draft Questions for Workshop

Workshop 1

- What are the specific issues and other factors that effect the treatment, care and support for drug users in rural and remote areas?
- How do these impact on the ability of agencies/service providers to commission, plan and deliver integrated care?

Workshop 2

- What has to be in place to implement integrated care in rural and remote areas?
- What are agencies/service providers currently doing in terms of planning and delivery of care?
- Are there local examples of good and/or innovative approaches you can share?