Community Planning Aberdeen

Improvement charter template

Improvement Project Title: Seaton Recovery Project
Executive Sponsor (Chair of Outcome Improvement Group): Judith Proctor
Project Lead: Paul Tytler
Aim statement (What are we trying to accomplish? Over what time? Numerical target for improvement?) SRP aims to become a model of recovery that is accepted as part of a range of provision provided in Seaton Learning Centre. By July 2018 we will have supported and engaged with 30 of clients supporting them with social and welfare issues. 10 will be supported into groups (either internal or external to Seaton Learning Centre) or supported into appropriate provision that further supports them in their Recovery.
Link to Local Outcome Improvement Plan: **This improvement plan links directly to the Woodside, Tilly and Seaton Locality Plan 2017 -2027**

Primary Drivers	Secondary Drivers	Lead Partners	Improvement Aims				
			Improvement Measures	**Baseline**	**2018**	**2021**	**2028**
We will prevent and reduce the levels of substance misuse in our community	We will deliver added value, innovative early intervention and prevention measures for those at risk of alcohol and Substance misuse. Develop appropriate community interventions and local alcohol support groups. We will train local projects to deliver alcohol brief interventions and make onward referrals to drug and alcohol services	H&SCP ACC Community Projects ADP	Number of new Initiatives Delivered. Increase number of alcohol brief interventions carried out locally % reduction in hospital stays related to alcohol misuse. % reduction in hospital stays related to drug				

	Ensure commissioning from the AHSCP is community needs led							

Business case (Benefit to clients/ stakeholders/ residents:? Are costs reduced now or in the future by addressing this issue?)

The Seaton Rehab project is refocusing on supporting people in recovery and to better align with supporting people access and engage commissioned services. The redesigned service will deliver a peer-led, co-produced recovery service, significantly improving support for clients in the community. The service will contribute to LOIP, Locality Plan, Community Justice Plan and the ADP improvement measures.

External funding is being explored with Alcohol and Drugs Action and Aberdeen in Recovery to allow additional resource to develop community based activities to support people in recovery – this will be additional resource for a period to support development activities, with a view to longer term sustainability. The model will be tested in Seaton in the first instance and consideration given to further development in other parts of the locality and other localities.

Improved services for clients, increased number of people supported, improved partner working, improved community safety.

Measures: (How will we know if a change is an improvement?)

Outcome measures;
- By July 2018 we will have supported and engaged with 30 clients supporting them with social and welfare issues.
- 10 will be supported into groups (either internal or external to Seaton Learning Centre) or supported into appropriate provision that further supports them in their Recovery; Get Ready to Cook, Art History, Music, financial support, counselling service, computing etc.
- Figures recorded monthly will demonstrate what support clients receive and who they are supported to access.

Process measures;
- To support clients into the aforementioned groups via working 1:1 with the staff directly supporting the Recovery Project. Individual's progress will be measured through 1:1 work where the Outcome Star will be utilised to determine where individuals are in their Recovery. The Outcome Star uses a range of factors on a scaling chart, which in the short and over time will indicate what areas are deemed a priority for clients and where the Project should target its support.

Balancing measures;
- Ongoing discussion / information sharing with partner agencies to ensure appropriate support routes / mechanisms are in place to support clients beyond their interaction with the Recovery Project.
- Individuals Road to Recovery is not a linear route and partner agencies need to be aware that their service needs to be available when individuals relapse.

Improvement measures
- Number of new initiatives delivered; increase in programmes created within Seaton Learning Centre – creating increased supported opportunities for clients.
- Increase number of alcohol brief interventions carried out locally
- % reduction in hospital stays related to alcohol misuse
- % reduction in hospital stays related to drug misuse

Change ideas (What can we do that will result in improvement?)

Service relocation – Seaton Recovery Project has moved to Seaton Learning Centre which has resulted in it being more inclusive within the community. It sits alongside a range of programmes and is seen as another provision within the centre.

Referrals to recovery services – Seaton Recovery Project will be seen as a source of referrals and progression for clients into other services that are seen as appropriate to their recovery needs.

Service redesign – clients who use the project will be consulted on and included in any design and delivery of initiatives that impact and support their route through recovery.

Community recovery activities – through service design activities and programmes will be inclusive of all those in Recovery.

ADP, ADA, AiR – the Recovery Project will engage, consult and work in partnership with our partners to ensure design and delivery links into wider provision within Aberdeen.

Big Lottery – the Recovery is working in partnership with ADA to support a bid to the Big Lottery fund which will allow additional resources (DART) to be created that will give further opportunity to those in Recovery.

Potential Barriers
Staff shortage.
Increase in referrals (would the service have capacity to meet expectations?)
Challenge stigma in the wider community.
Promoting the project as a place for those in recovery to come and get support.
Clients over reliance / dependency on services.
Clients not moving towards more autonomous living.

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