

East Renfrewshire Community
Addiction Services

Residential Rehabilitation
Care Pathway

June 2022

Consultation Process

In reviewing and updating this Residential Rehabilitation Pathway the following were consulted:

- East Renfrewshire Alcohol and Drug Partnership
- Alcohol and Drug Service Management Team
- Community Addiction Team
- Community Recovery Team
- Community Addiction Team Medical Officer
- Community Addiction Team Addiction Consultant Psychiatrist
- East Renfrewshire Lived Experience Panel
- East Renfrewshire Peer Researchers
- PARTNER Mutual Aid Group

Residential Detox/Rehabilitation East Renfrewshire Community Addiction Team

Criteria for consideration of one or more of the following:

- Service user has continued to have difficulty addressing or changing alcohol/drug use within a community setting.
- Service user requests access to residential rehabilitation.
- Psychosocial interventions and/or medical interventions have not affected desired change.
- Community alternatives have been explored and deemed to be unsuitable or unsuccessful.
- Risks have increased significantly. (This may include unsuccessful attempts at controlled/abstinence from alcohol or continued opiate use when appropriate therapeutic dose of MAT (Medication Assisted Treatment) has not been effective in reducing/eliminating illicit drug use; and unable to engage in psychosocial interventions being offered.
- Numerous attendances at Emergency Department admissions for non-fatal overdose, alcohol withdrawals.

Planned hospital Admissions for detoxification/treatment should have been explored and outcomes recorded.

Initial discussion to take place with Allocated Worker and Team Co-ordinator/Nurse Team Leader. If agreed to progress referral discussion will take place at a Multidisciplinary Team Meeting (MDT). Care Plan Review Meeting to take place with Allocated Worker and Service User

Identify needs of service user. Consider and discuss range of residential rehabilitation options/variations of programmes and approaches with service user.

Advise service user that any application will have to go through an internal approval process and external assessment from residential rehabilitation service.

Advise Team Co-ordinator/Nurse Team Leader when the following are completed:

- Reviewed Recovery Care Plan
- Updated SSA
- Updated CRAFT Risk Assessment
- Completed Rehabilitation Application Form including details of Intervention Required; Service Identified to best meet needs

Approved

Not Approved

Worker to make referral and process as per Guidelines. Worker to support service user in preparation for this intervention.

Worker to advise service user and continue to support in community and can revisit as required.

Team Co-ordinator/Nurse Team Leader/Lead Officer to review application.

If further information required this will be requested prior to a decision.

Written/verbal response to allocated worker with reasons for approval or non- approval within 5 working days. (Ensure service user is fully supported throughout this process)

Worker to participate in review and discharge process within identified residential rehabilitation establishment. Once placement completed, Recovery Care Plan to be reviewed and updated prior to discharge.

Agree community supports to be in place with service user prior to discharge. Recovery Care Plan Review Meeting with allocated worker and service user to be set up as soon as possible following discharge.

Residential Detoxification and Rehabilitation Guidelines East Renfrewshire Community Addiction Team (CAT)

Guidance to be followed in conjunction with Care Pathway.

Planning and Preparation

Before considering any residential placement application, the following needs to have been fully explored and evidenced within case file recording.

In all cases a Recovery Care Plan Review should be carried out by the allocated worker and service user. Allocated worker should liaise with all parties involved in service users care to fully inform this review. This should also include family members and/or significant others as identified by the service user; children and families where there is caring responsibility or access to children as well as those with children who are involved in social work services. The service user should be made fully aware of the commitment required to fully engage in a residential rehabilitation placement in order to get the best outcomes and to identify who can assist in their preparations for readiness to access residential rehabilitation in order to achieve their best outcomes. There should also be discussion and planning for when the placement will end and what the next steps will be.

Advise service user of the internal approval process and the process of assessment by the residential rehabilitation service to establish that they can manage the persons care.

- Consider all requests from service users for referral to Residential Rehabilitation.
- Review community approach and fully explore all supports available and outcomes.
- Explore the options for hospital admission through alcohol and drug routes; mental health route; general physical health route and Acute Admissions if there are urgent concerns. This should be discussed fully with Nurse Team Leader.
- Discuss referral for residential rehabilitation with the Team Co-ordinator/Nurse Team Leader or Lead Officer.
- Update **Single Shared Assessment** and **CRAFT Risk Assessment**. Complete all residential rehabilitation paperwork
- Identify with the service user the specific Outcomes they want to achieve and consider which of the residential rehabilitation services will be able to meet these outcomes.

Consider the different ethos within each organisation and the range of treatment approaches with the service user and agree which would fit with the service users' needs and will help them achieve their desired outcomes. Give service user appropriate literature regarding the resource. Advise service user that this is a consideration for referral and their application will go through a formal process before any agreement is reached. A pre-referral visit can be arranged if deemed appropriate and if possible.

A quick guide to examples of places available or previously accessed which is not exhaustive. More details contained within in Appendix I.

Organisation	Criteria	Detox Yes/No	Recovery/ Stabilisation Y/N (Details)	Benzo Maintenance	Length of Placement
Abbeycare	Private Clinic Male/Female	Yes	Recovery	Yes Person centred Subject to review	12 weeks
Calderglen House	Male/Female	Yes Drugs MAT No Alcohol	Recovery	Yes	3 to 6 Months
Cross reach Residential Recovery Service	Drugs/Alcohol Male/Female Drug/Alcohol Free Goal	Yes	Recovery - Abstinence	Yes (see further details)	12 week or longer
Phoenix Futures	Drugs/Alcohol Male/Female Age:16+	Yes	Recovery	Yes Person centred Subject to review	3 & 6 Months
Turnaround – Turning Point Scotland	Drugs/Alcohol Justice Service Referral and Access only Male only	Yes	Yes Recovery Abstinence	Yes	6 weeks Throughcare 12 weeks Aftercare

If an alcohol detoxification is required this will to be progressed through the CAT Health Assessment Process. If a hospital detoxification is identified as most appropriate this will be co-ordinated to allow direct referral from hospital to residential rehabilitation service. Alcohol detoxification will not be funded from the residential rehabilitation budget.

- Team Co-ordinator/Nurse Team Leader/Lead Officer will meet to review the application and provide verbal/written response to worker within 5 working days of meeting.

Once agreed the following can be progressed by Allocated Worker:

Referral Process

Please refer to information from specific residential rehabilitation providers for the referral process.

Financial

There is no financial contribution required from the service user. This is a finite budget for residential rehabilitation and if all funds are committed then further discussion will take place with HSCP senior management on a case by case basis.

A Service Agreement will need to be put onto Care First (Business Support GR can do this) to enable the establishment to be paid. Once Service Agreement is on this will be authorised by Team Co-ordinator/Nurse Team Leader or Lead Officer. If detox is part of the agreed plan a separate service agreement will need to be put on for the detox element.

Forms to be completed as part of the Assessment

- Recovery Care Plan Review Updated
- Single Shared Assessment to be updated with the need for residential rehabilitation identified and reason why.
- CRAFT Risk Assessment to be reviewed with review date noted
- Residential Rehabilitation Application
- Forms are stored electronically in the ERC Shared Drive Folder: L:\Teams\St Andrews\Substance Misuse Team\RESIDENTIAL REHABILITATION
- Each residential organisation may have their own paperwork that requires authorisation from Team Co-ordinator/Nurse Team Leader or Lead Officer.

Other Issues – Housing/Welfare Benefits

- If the service user is a Council or Housing Association tenant, then contact should be made with the Housing Authority to advise of the plan for being away from the tenancy for a specific time. This could result in the tenancy being made secure for the time away, or if there are circumstances to give up the tenancy then arrangements can be made for furniture and personal items to be securely stored until return to the community.

- If service user is sole tenant, Council Tax Exemption form to be requested from ERC – to be completed with client to ensure maximum rebate is received by them. MART Team can also help with this.
- The DWP (Department of Work and Pensions) may need to be informed of change in circumstances by the service user and this may impact on current benefits received – eg if in receipt of Employment Support Allowance (ESA) then this may change to Universal Credit.

Reviews

Allocated worker will attend regular reviews with service user to monitor and review their progress and to make plans for the end of their placement and possible return to the community. A revised recovery care plan will be agreed prior to discharge and this will be followed up by a recovery care plan review meeting with allocated worker and service user within the community as soon as possible following discharge

Return to the Community

- Establish community supports prior to discharge from the residential rehabilitation placement – this could include family/significant others, Mutual Aid Groups (PARTNER); Peer Support from Penumbra or others of your choice; Fellowships – AA, NA, CA.
- Housing applications should be completed for those who were homeless prior to admission – ensure that a homeless application, as well as a normal application is completed to ensure the service user gains the maximum priority status. This should be completed at 2 months before discharge and will not be accepted by housing before that time.
- Service users are a high priority for DWP Grants – this should be explored and supported by allocated worker.
- Travel cards will be offered from CAT for a period up to 3 months following discharge for the purpose of attending AA/NA, SMART Recovery Groups, Mutual Aid or Peer Supports.

Appendix I

More information on all Residential Rehabilitation Services across Scotland can be found online on Service Websites and by contacting Services directly. This is just a snapshot that may be helpful with the Residential Rehabilitation Pathway.

Organisation	Details of Service
<p>Abbeycare Erskine Mains House Meadows Drive PA8 7ED</p>	<p>The Abbeycare 12-week program is designed for clients recovering from chemical dependence/addiction, addictions and psychological trauma, as well as presenting co-occurring mood and anxiety disorders. It is an integrated model incorporating best practice abstinence-based addiction treatment approaches, Cognitive Behavioural Therapy (CBT), Dialectical Behavioural Therapy (DBT) and Trauma Treatment approaches and protocols. Safety, stabilisation, efficacy and empowerment are emphasised throughout the client's treatment journey. The program is developed from research and evidence identifying the variety and levels of burden clients in active addiction, early recovery in treatment settings, and on-going abstinence-based recovery consistently experience and report.</p>
<p>Calderglen House Residential Rehabilitation Off Blantyre Farm Road South Lanarkshire Scotland G72 9UG 01698823 624</p>	<p>Multi-model treatment - Therapeutic Community</p> <p>Assessment and 3 to 6 months stay. Aftercare weekly.</p> <p>Provides Methadone/Drug Detox. No Alcohol Detox – this would need to be arranged via Community Addiction Team prior to admission.</p> <p>Offer a range of interventions. Has some videos on website to view facilities</p> <p>Provides: Group work, 1-2-1, Mutual aid, Mindfulness, Animal care –goats and chickens, CBT, Yoga, Gym and meaningful activity</p>
<p>Cross reach Residential Recovery Service 21 Westland drive Glasgow G14 9NY 0141 950 1772 PA8 7ED</p>	<p>RECOVERY ABSTINENCE</p> <p>Maximum 60mls Methadone may require longer than 12 week detox.</p> <p>30mls Methadone – 12 week detox.</p> <p>Buprenorphine – oral and long acting – reduction or 12 week detox.</p>
<p>Phoenix Futures Scottish Residential Service Glasgow 15 Castlebank Villas</p>	<p>THERAPEUTIC COMMUNITY MODEL OF INTERVENTION</p> <p>The service offers a drug and alcohol free environment Residential Support Service and structured support for men and women looking to address their problematic drug or alcohol use. The programme runs for 3-6 months providing 1-2-1</p>

<p>G13 2XA 0141 332 0121</p>	<p>support and group work</p> <p>There are 31 large modern en-suite rooms.</p> <p>Supported by staff, residents are responsible for the day-to-day running of the house and supporting each other throughout the programme with more senior residents becoming 'buddies' and role models for new residents.</p> <p>The service has excellent links with the local community and service users have great opportunities to gain volunteering and educational opportunities. After completing treatment at the residential, residents are supported to move onto supported housing services or their own accommodation.</p> <p>A range of detox treatment is available – for more information you can call the referral line on 0141 332 0121 or email glasgow@phoenixfutures.org.uk</p>
<p>Turning Point Scotland Turnaround Contact Details Turnaround 219 Gleniffer Road Paisley PA2 8UL T: 01505 810 800</p>	<p>Drugs/Alcohol - Justice Service referral and access. Only for Male offenders who have a maximum of 6 months left on an order.</p> <p>Criminal Justice Social Work Referral.</p> <p>Turnaround - The Turning Point Scotland Turnaround service delivers focused services that address the complex and interrelated issues of offending behavior and problematic use of alcohol and other drugs.</p> <p>Through care service - Turnaround Through care is the preparatory stage of the service and provides individualized, practical support in the community before entering Turnaround Residential service.</p>