

National benchmarking report on the implementation of the medication assisted treatment (MAT) standards: Scotland 2024/25

Simplified summary

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Version history

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Where did the Medication Assisted Treatment (MAT) Standards come from?

Over several years, drug-related deaths and drug-related harm in Scotland have increased. Research tells us that providing treatment is a way to lower the risk of harm linked with problematic drug use.

The MAT Standards were published in 2021, by the Drug Death Task Force to help reduce drug-related deaths in Scotland.

This is the fourth report published since 2021.

It is important to note this report is based on assessing what is being done to put the Standards in place, rather than how useful or effective the standards are.

What are the Medications Assisted Treatment (MAT) Standards?

The purpose of the 10 MAT Standards is to make sure people get access to a choice of safe, high-quality treatment and wrap-around support:

- when they need it,
- for as long as they need it.

Alcohol and drug partnerships (ADPs) are responsible for reporting on the MAT Standards – there are 29 ADPs in Scotland.

Each of the MAT Standards has a different focus:

- MAT Standard 1 same day access
- MAT Standard 2 choice of treatment
- MAT Standard 3 assertive outreach
- MAT Standard 4 harm reduction
- MAT Standard 5 support to remain in treatment
- MAT Standard 6 positive relationships and social networks
- MAT Standard 7 primary care involvement
- MAT Standard 8 broader support needs
- MAT Standard 9 mental health
- MAT Standard 10 impact of trauma

Read more about each Standard in the Scottish Government publication **Medication Assisted Treatment (MAT) standards: access, choice, support.**

Who are the MAT Standards for?

The MAT Standards are intended for:

- people and families accessing or in need of services to support problematic drug use,
- health and social care staff responsible for the delivery of drug treatment and support services,
- leaders in Scotland to ensure the necessary governance, resource and accountability is in place.

Why do we need to measure whether the MAT Standards have been put in place?

We need to measure whether the MAT Standards have been put in place and how well this has been done.

This helps to make sure that what we said we would do in Scotland is being achieved.

To do this, three different kinds of information are collected from ADPs: process, numerical and experiential.

Process Evidence

 this looks at how local services and activities are carried out to meet the standards

Numerical Evidence

 this looks at information being gathered to measure service activity

Experiential Evidence

 this looks at the experiences of people who use services, their family members and people who provide services

The information gathered across the three areas are then scored to check each ADPs progress against a set of agreed measures. This is done by assigning a RAGB (red, amber, green and blue) status. This is also called 'benchmarking'.

Table 1: Full description of the RAGB categories.

RAGB Colour	What it means?	Categorisation
Red	There is no or limited evidence.	Not implemented
Provisional amber	There is evidence that activities and services are beginning to be put in place but no evidence of benefit of people.	Partially implemented
Amber	There is evidence activities and services have been partly put in place and are benefitting people.	Partially implemented

RAGB Colour	What it means?	Categorisation
Provisional green	There is evidence activities and services have been put in place and are benefitting people, however, this is not confirmed by all three kinds of information.	Partially implemented
Green	There is evidence that activities and services have been put in place fully and are benefitting people across settings.	Fully implemented
Blue	There is evidence that activities and services have been put in place, are being maintained, and are benefitting people across settings.	

What does the 2024 to 2025 report tell us?

MAT Standard 1 – same day access

- 25 out of 29 ADPs have been assessed as fully implemented or activities and services have been maintained.
- 4 out of 29 ADPs have been assessed as partially implemented.

MAT Standard 2 - choice of treatment

- 27 out of 29 ADPs have been assessed as fully implemented or activities and services have been maintained.
- 2 out of 29 ADPs have been assessed as partially implemented.

MAT Standard 3 – assertive outreach

- 26 ADPs have been assessed as fully implemented or activities and services have been maintained.
- Three ADPs have been assessed as partially implemented.

MAT Standard 4 - harm reduction

- 27 ADPs have been assessed as fully implemented or activities and services have been maintained.
- Two ADPs have been assessed as partially implemented.

MAT Standard 5 – support to remain in treatment

- 27 ADPs have been assessed as fully implemented or activities and services have been maintained.
- Two ADPs have been assessed as partially implemented.

MAT Standard 6 and 10 – positive relationships and social networks, and impact of trauma

- 22 ADPs have been assessed as fully implemented.
- Seven ADPs have been assessed as partially implemented.

MAT Standard 7 – primary care involvement

- 18 ADPs have been assessed as fully implemented.
- 11 ADPs have been assessed as partially implemented.

MAT Standard 8 – broader support needs

- 26 ADPs have been assessed as fully implemented.
- Three ADPs have been assessed as partially implemented.

MAT Standard 9 - mental health

- 21 out of 29 ADPs have been assessed as fully implemented.
- 8 out of 29 ADPs have been assessed as partially implemented.

How do we know we've made progress?

The information and evidence provided by ADPs (process, numerical and experiential), helps us understand the progress being made in putting the MAT Standards in place.

MAT Standard 1 to 5 (145 measures)

- Across all 29 ADPs, 91% (132 out of 145) of measures have been assessed as fully implemented in 2024 to 2025.
- This is an increase from:
 - o 17% in 2021 to 2022
 - o 66% in 2022 to 2023 and
 - o 90% in 2023 to 2024

MAT Standards 6 to 10 (145 measures)

- Across all 29 ADPs, 75% (109 out of 145) of process measures have been assessed as fully implemented in 2024 to 2025.
- 94% of numerical evidence provided also met the criteria for full implementation.

Experiential evidence*

An important way to gain understanding of people's experiences of services is to talk to them.

All 29 ADP areas provided evidence that they had gathered people's experiences of services. This was based on interviews or surveys with service users and staff.

In 2023 to 2024, 1074 responses were received. In 2024 to 2025, a total of 1,057 responses were received from across the 29 ADP areas in Scotland.

These included:

- 653 people accessing treatment (584 in 2023 to 2024)
- 274 with service providers (342 in 2023 to 2024)
- 130 with family members or nominated people (148 in 2023 to 2024)

In addition to this, around 558 people provided information in other ways, such as through focus groups or conversation cafes.

Exact numbers are not known but these included:

- Around 192 people accessing treatment (295 in 2023 to 2024)
- Around 133 service providers (133 in 2023 to 2024)
- Around 46 family members or nominated people (71 in 2023 to 2024)

What's next?

- A report on people's experiences of services will be published in Autumn 2025.
- Alcohol and drug partnerships will continue to put the MAT Standards in place through their activities within their services and progress will be reported on again next year (2025 to 2026).
- Putting the MAT Standards in place in Justice settings has started and will continue in 2025 to 2026. This will be included in the next report in 2025 to 2026.

^{*} It is important to note that it is not possible to compare experiences collected from previous years because of the changes to the measures used and requirements.