

Quarter 1: Insight for Combating Drugs Partnership Board Public Involvement

From Healthwatch Surrey Insight & Luminus engagement

June 23



Shining a light on what matters to people.

Quarter 1: Insight for Combating Drugs Partnership Board Public Involvement From Luminus community engagement (including Healthwatch Surrey, Giving Carers a Voice, CDPPI and Advocacy).

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Activity in Q1

Through our Healthwatch Surrey community engagement, Helpdesk, NHS Advocacy and website, we sometimes hear from people struggling to access support services for substance use. A high number of these are from unpaid carers.

Community engagement is carried out in community spaces, going to where people are and focusing on reaching people most at risk of health inequalities. We adopt an immersive listening approach. We very much want to hear what matters to local people and understand barriers to accessing support and care.

Since mobilising the Combating Drugs Partnership Public Involvement service, we have been busy immersing our team in understanding the challenges faced by individuals and their families who are living with substance use. We have carried out meetings with the Chair of each of the four subgroups of the Combating Drugs Partnership (CDP) Board to understand what their priorities are.

We are also creating engagement support materials such as flyers, posters, and thank you cards. These will carry a QR code so that people can give feedback to us in their own time. We have also extensively looked at the listening landscape to determine what support exists and where. Using this information is key to shaping our resource signposting to better support individuals and their families and empower them to seek help after we meet with them on engagement.

Looking ahead for Quarter 2

In the coming quarter our focus will be supporting the CDP Board to achieve their ambition in response to the governmental drive to increase numbers in treatment. Through our Q2 engagement, we will strive to understand what the barriers are to accessing treatment, challenges faced by individuals and by their families, understanding what good looks like when people do access treatment, and we ensuring we provide appropriate signposting to services and support for those who may want to access treatment but are not currently engaging with services.

We will speak to people to understand:

- If they have accessed treatment before, why are they not accessing it now if the need is still there.
- Do individuals/their families and support networks know where to go for support and advice?
- Are there barriers in accessing support and care? Is it accessible to all?
- What prevents people from engaging with services (e.g., stigma, recreational users, those in denial)

For Quarter 2, we will be visiting places in the local community ensuring we capture the views and experiences from a wide demographic to include individuals affected by substance use, their families and people affected by drug related crime.

We will produce an Insight Report in October that will summarise the key insight and findings from the engagement during Q2.

Gathering Insight in Q1

During Q1 we held two specific engagement events:

15th June - Renewed Hope, homeless drop in, East Surrey 21st June - Hope Hub, homeless drop in, Camberley

We have also analysed any recent relevant experiences from our CIC database (this holds experiences shared by Surrey residents across all our services including Local Healthwatch and Giving Carers a Voice). We have included the insight below and grouped into some topline themes which can be found below.

Note: the experiences below were gathered through agenda free listening events, with no discussion prompts.



Support for families in treatment

"I am a carer for my nephew who is struggling with addiction. I-Access treat my nephew and also put me in touch with [Named professional], who has supported me over the last four years with home visits, telephone calls and signposts to other services. His help, advice and listening ear has been absolutely invaluable to me and I truly cannot imagine how I would have coped. He advised me in the beginning of how to register as a carer, which allowed me to have a small financial grant for a break. Having been through so much at that time, in the early stages of discovering my nephew's addiction, this was truly a life saver. Being a senior citizen with no experience of addiction, leave alone how to support an addict that I love, [Named professional] experience and advice has given me strength and confidence. Having his contact details and the continuity of access to the same person is a great comfort because I know that there is someone who knows my story that I can ask for help. Just knowing that truly makes all the difference. Caring for an addict is an isolating experience, especially because of the stigma surrounding addiction. This resulting lack of the usual support framework of friends and family means that the work of people like [Named Professional] and his colleagues is a lifeline for people like me. This single, accessible point of contact takes away a lot of the fear and loneliness that comes with supporting an addict and it has allowed me stress-free access to counselling services that have been amazingly helpful. In my opinion these services should be prioritised and especially now that we live in such a troubled world." **Healthwatch Surrey Website, Female, 65-79, White British, Carer**.

"I'm a carer for my son who has a drug addiction. It's been going on so long now, I've heard all the excuses in the book. I'm now beyond caring. I just don't listen to it anymore. We paid for him to go to rehab for four months. I think that was good but he's recently come out and is back on the drugs. My husband is really struggling with the whole situation and is very stressed. Action for Carers are trying to get us some counselling with Space4You but even this has a long waiting list. We did an online course through Action for Carers recently on living with someone with substance abuse. It was good but it just needed to be a lot longer. These things are so important and there is so little out there for carers of people with addictions. It's incredibly hard." **Giving Carers a Voice, Female, 49-54, White British, Carer.**

"My son has problems with drug addiction. There just doesn't seem to be any rehab out there unless you pay for it yourself. We had to pay for four months of rehab. We can't afford it, but you just have to, it's your child. I don't sleep. I am always worrying, I'm so anxious. We have two other sons, one still living at home but wants to move out as things are so awful. I feel so sorry for both too and guilty. There is a massive lack of support for parents of people with addictions. It's ridiculous. Our lives are on hold, every day is the same. We can't go away or do anything. It's awful." **Giving Carers a Voice, Male, 50-64, White British.**

"My 16-year-old [adopted]daughter has ASD and PDA. She's not in education and hasn't been for a long time. She does have an EHCP, but this took a while to get and then to kick in. We've tried various places, but she just absconds and so even the residentials have been a disaster. She smokes weed, has got in with the wrong people which has resulted in her being raped, having alcohol abuse, self-harm etc. We have tried to get help from everywhere but when we have asked social services for help, she runs away, they tell us that we must let her go and not restrain her!" **Giving Carers a Voice, Female, 50-64, White British, Carer.**

Support for individuals in treatment

"When I raise concerns about my treatment from I-Access, I am not listened to. When I contact them by email or telephone, they do not get back to me. I am intending to request a new key worker as part of my formal complaint." **Advocacy client, Gender – prefer not to state, 25-49, Ethnicity, prefer not to state.**

"Only been a couple of times for I-Access. Was self-referred. Was seen at Epsom hospital - this place is very local, almost too local. I like the new building and the staff are very friendly." **Community Engagement, Male 25-49, White British.**

"I am now accessing I-Access and being helped by [xx] the vets lead at Surrey and Borders Partnership. It has taken a while for me to be able to access this help. I have PTSD and alcohol problems. I have managed to stay sober for 5 years and have been to rehab but I have gone back to drinking. I guess it's because I'm bored. I do work but it's when I don't. Then it's just a downward spiral. I was discharged from the army in 1996 and there was no help for me at all. I am registered with Woodbridge surgery [Guildford] but I don't see the same doctor. I would like to be able to see the same one. I have complex issues and it would be so much easier for me if I saw the same person who knew my history and what I was talking about. They would get to know me too. It's been quite a while since I have been to the doctors." **Giving Carers a Voice engagement, Male, 25-49, White British, Veteran.**

"I live on the Cornwell Estate in a Raven Housing flat. I feel quite vulnerable and can't cope with noise. I split with my partner and got arrested. I've had numerous panic attacks and ended up at A&E. I can be ok one minute and the next my levels drop. I feel like I must do everything myself. Greystone (GP) referred me to Gatton Place but they aren't helping me. They just give me medication. GP's and consultants are horrible to me. Gatton Place won't come and visit me to help and I have asked. I did use Safe Haven in Crawley and accessed the AA through them. It did help me manage my drinking levels. I still drink but feel it's manageable and I don't want help. I know where to go if I need help." **CDP Engagement, Redhill West & Wray (Key Neighbourhood), Male, 25-49, White British.**

Wraparound support

"I've been coming to the Hope Hub for 6 months. I come here every day. I am a recovering alcoholic. I was sober for 3 years but stuff with my ex-wife and kids is

very triggering. I am on the priority list for my GP, they call me once a week to check in on me and my medication and review it regularly. They are very supportive and contactable. I go to Frimley Park Hospital and Aldershot Centre for Health for appointments to check on my mental health and liver etc. I was in High Down prison for 6 weeks and released into a rehab facility [unknown]. I used to live in a car park in Camberley during Covid. I am now on an accelerated pathway for housing. I've been classified as high risk; I don't want to house share. I have 3 children so need space to see them. I really need help with my teeth, the ones I have left! Don't know who can help me." **Community Engagement, Male 25-49, White British**.

"I have used talking therapies before, I had 10 sessions, it was all over the phone and to be honest I would have preferred face to face, that would have improved it for me, I struggle a bit on the phone. I'm not sure I'll do it again; I'll see how I get on with the meds. It did help at the start but then I kept relapsing and now I find Cocaine Anonymous is the best thing for me, CA can be for any substance user. I go to the meeting every week, me and a couple of my friends have been supporting each other to go along. I live in shared accommodation, and we are working to support each other. The place is called 'Amber' and it's a charity which aims to help transform lives. There are staff there 24/7 and they are helping us to get our lives back on track. No, I haven't heard about recovery colleges and don't really know anything about mental health services in the area open to me." **Community Engagement, Male, 18-24, Ethnicity unknown.**

"I am a heavy drinker. I'm not really supported now. In recent years, I've accessed the Hub in Ipswich upon being released from prison. I did well at the Hub, and they extended it for another week but could have done with more. I've done Catalyst for counselling. I am currently staying in temporary accommodation in Farnham with other addicts. This is very stressful as there is a lot of mental health issues there. People get into my space when cooking, tensions get high, and I have to threaten people to leave me alone. Last month I went on holiday, and I got on one. I was refused my flight home and people from this service [Hope Hub] had to come and get me home. I then had to go to Frimley Park Hospital to have treatment due to abusing my body with alcohol. I'm not accessing any help. I know what I must do but I do sometimes binge. I have liver checks regularly at Aldershot centre for Health." **CDP Engagement, Male, 25-49, White British, homeless.**

"I am on probation for harassing my ex-partner and am now not allowed to contact my daughter. I feel I am being set up to fail by the Probation service. They text me about appointments but sometimes I can't afford credit to reply. Then I get told off for not responding. I have been accepted onto 'Bridge the Gap' run by Catalyst through Hope Hub but not heard anything. I'm living with my mother temporarily now. We have only recently reconciled. I was homeless after my ex kicked me out due to anti-social behaviour, drinking and drugs. **CDP Engagement, Male, 25-49, White British, Homeless.**

"I smoke pot to help me but would prefer just CBD as don't like the high from the pot but feel better when smoking it. I am getting a CBD vape from a shop. I've been wanting/waiting for therapy for years for PTSD and Trauma. I've suffered from domestic abuse, childhood trauma and death of my son and mother." **CDP Engagement, Redhill West & Wray (Key Neighbourhood), Female, 25-49, White British.**

"I have been involved with Gatton Place [SABP] since I was 16, I am now 27. I've had past abuse and not had treatment for it. Gatton Place just medicate me. All I've ever had is 6 CBT sessions. CBT is not what I need or want. I need trauma counselling. ESDAS (East Surrey Domestic Abuse Service) see me outside of my home which helps a little. I'm on a lot of medication. I request this every month. The consultants at Gatton do not read my notes. I must start from scratch every time which triggers me. Feels like the consultants there are so inexperienced, like they are in training. Can ever get an appointment with someone, it's on the phone. I want therapy. GP say that they can't help me as they are not mental health experts. I don't blame them as they try to support me. I called Gatton Place and no one answered. The voice mail I'm sure says something like don't go to A&E, so where then? I could leave 100 voicemails, and no one got back to me. I'm just always up and down. Everything is triggering me right now. I just want support. Not having it is stopping me from moving forward. I don't want to not shower for 4 weeks or to not get out of bed. I am a Mum and a person who wants to function better. I have twins with SEN. Both need an EHCP. School just told me that I am past the 20-week threshold. Don't even know what that means. I have a PIP but don't know if I am entitled to anything for my children. Don't want any benefits taken away. I use soft drugs. Smoke some weed. I would like to stop or cut down; my mum helps me sometimes." CDP Engagement, Redhill West & Wray (Key Neighbourhood), Female, 25-49, White British.

"I was made homeless from a cuckooing incident in my home. I was having parties all the time; everyone would come here. People I didn't know, it was getting out of hand. There was so much drink and drugs. I had lived in the flat for years and years. I was served with a Closure by the council. It was so mortifying, it was so visual, everyone could see I was evicted. All the local people were talking about it. The Hope Hub are housing me in their temporary accommodation unit and are helping me get back into my flat. I have binge drinking for 2 years which I know was triggered by the death of my long-term partner from cancer. I was offered bereavement counselling but wasn't in right place to receive it. I have had support from Catalyst in the past but don't feel I need it as I got sober myself. I went cold turkey. I was really ill for a few days, but it has been now 7 weeks since I have touched anything." **CDP Engagement, Male, 25-49, White British, Homeless**.

Feedback from frontline staff: Hope Hub

NB: we distinguish in our analysis between experiences which have been shared with us directly by people who are service users/patients/people with lived experience; and what we term "soft intelligence" which is feedback shared by staff we meet during engagement; feedback we may gather through social media etc. We are always conscious this may be a partial view of services; however, we feel it is important to include it.

Feedback from Mental Health / Wellbeing case worker & Service manager at the Hope Hub...

They told us about an issue with cuckooing, and when notice is served on a flat because police shut it down, other vulnerable people are left homeless. There are also issues with Camberley being on the border, meaning people come from Rushmoor / Bracknell forest might get housing sorted with Surrey Heath Council but then mental health team is out of area. The wellbeing case worker felt they would benefit from more communications/signposting information from I-Access. Most people have a GP but Hope Hub does help people register with GP and dentist. They have a good relationship with the practices. Hope Hub also holds onto personal items for people including personal documents such as birth certificates because some people are very transient and on the move. There was a feeling that I-Access had let down some of the people they had referred to their services and that people can use the service as a tick box to get people off their backs.

Signposting: There is a notice board in the self-help breakfast area, with information about Bridge The Gap [Catalyst, Rent Start, Oakleaf, Surrey Domestic Abuse Partnership, York Road Project and Guildford Action]. This is 4-8 hrs of support per week. However, a service user said they had been accepted onto the programme but not heard anything back. Also signposting for debt help, cookery, budgeting and comms around SAM (Surrey Adults Matter).

Feedback from frontline staff: Renewed Hope

Feedback from Project Coordinator

When people come here, we assess them, and our duty of care house care package comes into force. This means if someone is using drinks and drugs, we ask them if they would like help with this. We refer to I-Access but really, we feel it is just a tick box for people to say they have interacted. In Maslow's hierarchy of needs, stopping the one thing that is making their life bearable just isn't a priority. Finding accommodation and a warm meal is. There is a lady that comes in from ESOS which is East Surrey Outreach services, and she assesses how many rough sleepers we have in the area and helps work with the council to find a resolution. We hear a lot of negative reports about Gatton Place [SABP]. They seem happy to medicate but not keen on actual treatment. Several people have deep child abuse trauma and need proper trauma therapy but are just get given medication. We signpost to other services but don't always know where to signpost.

Luminus signposting and safeguarding

On engagement, our team always signposts to appropriate support and care services. For example, if someone is struggling with finding a dentist, they will be given information for Dentalchoices.org. Support services are given where relevant; I-Access, Catalyst, Mind Matters (if mental health exclusively), The Hope Hub, Renewed Hope, York Road Project etc., Al-Anon, AA etc.) We check in with community leaders if someone has said something we are unsure of or concerned about to ensure that the person is being supported and not alone.

Contact us:

Contact us through any of the channels below.

We'd love to hear from you:

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