Insight Bulletin: Substance Misuse

Giving people a voice to shape decisions about health and care services

April 2019

Substance misuse services in Surrey changed in April 2018¹ and this bulletin summarises the views and experience of some current users. It follows a request for some in-depth independent insight from politicians that are scrutinising the impact of service changes.²

What we did

In February and March 2019, Healthwatch Surrey staff and volunteers visited services and gathered the views of 44 users of substance misuse services via a

self-completion questionnaire.

The respondents were users of the following services:

- I-access Abstinence Preparation (Farnham Rd hospital)
- I-access Relapse Prevention (Farnham Rd hospital)
- SMART³ recovery group in Guildford and Reigate
- I-access Recovery Cafés in Guildford and Reigate
- One person at their first appointment at Laurel House



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We heard from a mixture of people, around half being new users of the service (less than 6 months) and almost a third having used the service for over 2 years.

We did not hear from people waiting to access the service or from those who recently accessed inpatient services.

What we heard

People told us that they were very satisfied with substance misuse services.

People gave us positive feedback about:

- The supportive and compassionate staff
- The peer support sharing with likeminded people
- Non-judgemental environment
- Information, tools and strategies provided
- Speedy access for substitute medication
- Good mix of structured and informal help
- Social aspect

¹ Home detox service and ambulatory detox services are now provided in Guildford and Redhill, transport is paid for. In-patient detox is no longer commissioned in Surrey, but available in Kent to those with complex needs. Blenheim Skype provides a service for high risk/problematic drinkers, replacing the face-to-face one-to-one sessions previously provided by Catalyst.

² A verbal report on the findings was presented on 08/03/19 at a meeting of the Health, Integration and Commissioning Select Committee of Surrey County Council

"It has changed my life! Clean and sober for almost 1 year, which is something I never thought I could do. So they gave me back self-belief and self-worth".



"The help, support, love and care l've received from SMART* and l-access is so fundamental in my recovery, and has been massive".

"Extremely caring, supportive staff. Good speedy access for substitute medication".

"It lets you find a route to recovery, that works best for you personally. Open minded approach".

People told us things could be improved around:

- Better aftercare after discharge
- More provision for the non-dependant drinker⁴
- More collaboration with mental health services
- More meetings, longer meetings (SMART)

"Emphasis on aftercare after discharge. The detox unit at Windmill house been closed down which is awful. This service is desperately needed to save lives".

"Funding for treatment centres for continued support with drug agencies such as I-access after treatment".

"Greater accessibility of group work and particularly alcohol treatment for the non-dependent drinker. We could do with an NHS rehab again and better funding for social care".

We asked service users whether they had noticed changes to the services:

Some mentioned **positive** changes such as more people using the services, new staff, different outlook. However, more people said there had been **negative** changes. These comments centred around the closure of Windmill house.

"Windmill has closed – this is a catastrophe! Access to services for nondependent drinkers is drastically cut, as is access to some of the group work".

"The closure of Windmill House, makes accessing in-patient treatment far more difficult. Funding cuts have had a negative impact on those who do not reach the threshold for treatment and intervention".

⁴ Non-dependent (problem drinkers). Problem drinking is where the individual begins to experience difficulties in their life because of their alcohol intake, but they persist with the behavior. Dependence means that the individual has developed a physical or psychological dependence on alcohol (usually both).

We also asked users whether the services were achieving their stated objectives (as defined by service commissioners). The majority of service users we heard from:

- Agree that their needs are adequately met
- Agree that they expect a positive recovery outcome
- Agree that they have recovery goals

However:



 Some people don't agree that they have a single point of contact (particularly among the abstinence preparation group)

Summary

The current users of substance misuse services that we heard from are very satisfied with the services⁵. However, part of the recent changes to the model of detoxification has involved the closure of Windmill House, which has come as a disappointment to some. The closure means that those whose needs require 24/7 care rather than the ambulatory detoxification service, who used Windmill House, now have to travel to Kent for in-patient detoxification services.⁶

Next steps

Based on what people told us, we have developed the following recommended actions:

- Service providers should consider reviewing people's experience of having a single point of contact (this is a known issue within the abstinence preparation group).
- Commissioners should consider conducting research into the experience of people, Carers and families who have travelled to Kent for in-patient detoxification

This report represents a snapshot of the current experience of people using the services. Thanks to Catalyst and i-access for introducing us to the people involved.

We exist to give people a voice to improve, shape and get the best from health and social care services. If you have a story to share with us – good or bad – you can contact us at 0303 303 0023, enquiries@healthwatchsurrey.co.uk or through SMS on 07592 787533.

⁶ Support (e.g. financial, public transport, taxis) has been commissioned for people to make this journey



⁵ We did not talk to people waiting to access services or those who had recently accessed in-patient services.