

Local Account of Adult Social Care 2013-14

People affected by drug and alcohol misuse



Promoting
independence



People affected by drug and alcohol misuse

M's experience of rehab and aftercare

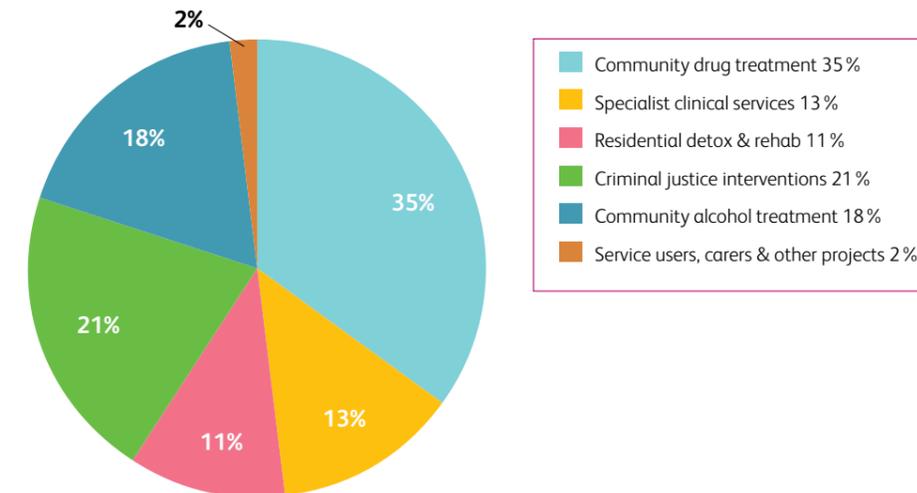


I am not being overly dramatic when I say residential rehabilitation funded by Hackney Council and the excellent aftercare I received, saved my life and helps keep me clean every day. I went seamlessly from a course on treatment options run by Hackney Drug and Alcohol Action Team to a life changing residential rehab, and then back to my local area - always a danger zone. Getting clean was easy, staying clean is a daily battle. The support I get helps every step of the way. My local care co-ordinator arranged an appointment to see him as soon as I got out. Getting out is tough. You go from this cocoon of love and support back into the world and relationships you messed up. My aftercare was

vital to prevent what would otherwise have been a certain relapse. I had a daily schedule. I saw a psychologist and a nurse. It is so fantastic to see the results of your first normal liver function test. They put me in touch with good, clean people. Not all of these former users were on 12 step programmes as it is not the answer for everyone. They treated me as a person, not an addict, and my self worth returned. I was not just a useless druggie who had nothing to contribute to society. Now I have a job, a flat, a good relationship with my kids and a sense of purpose. None of that would have happened had I not taken that first step, weeping into the phone on Mare Street, trying to get a placement in rehab.

What we spent in 2013-14

Drug & Alcohol Expenditures



Community drug treatment	£1,960,093
Specialist clinical services	£736,226
Residential detox & rehab	£583,594
Criminal justice interventions	£1,126,390
Community alcohol treatment	£978,681
Service users, carers & other projects	£96,846
Total	£5,481,830

Hackney's Drug and Alcohol Action Team (DAAT) is funded by

- Public Health
- Mayor's Office for Policing and Crime (Mayor of London)
- Mainstream council funding for the substance misuse team and for residential rehabilitation placements

Problem drink and drug use in Hackney

Hackney's services worked with 2,068 people with substance misuse problems last year including 1,516 drug and 552 alcohol clients.

A total of 82 people entered planned detox and/or rehabilitation for treatment during the year. Hackney residents in treatment for opiate (heroin) and/or crack cocaine increased 8.5% compared with a 1.5% fall nationally. Drug use remains high among homeless people and sex workers. We are seeing increasing numbers of people misusing cannabis, ketamine and GHB.

People in treatment use fewer illegal drugs, commit less crime, improve their health and manage their lives better. Keeping people in treatment long enough to benefit contributes to better outcomes for the person and the wider community.

We fund the following treatment services:

- Hackney Lifeline Community Drug Service
- Hackney WDP Criminal Justice Drug Treatment Service
- Community Alcohol Recovery Service
- East London Foundation Trust Specialist Addiction Service based at Homerton University Hospital
- Two hospital based specialist midwife posts and 3.5 clinical nurse specialist posts

We are reviewing our services, have talked to service providers and service users and plan to launch a new service late in 2015.

The new service will build and improve on the success of our current arrangements and will include the following:

- A combined service that works with problem drink and drug use together
- No wrong door – we know service users can be lost if they are asked to attend alternative locations to be assessed
- All providers must be able to accept and complete referrals in our new service
- Virtual single point of entry – service users will be able to access the service at a number of points but the assessment and referral process will be consistently applied and coordinated
- Service users will not be asked to complete multiple assessments
- At least one easily identifiable physical point of entry
- Service users will have access to timely treatment and assessment without long delays
- Service users will be able to access services in a way that is sensitive to the level of their substance misuse

Plans

Below we have summarised what we did for people with substance misuse needs in 2013-14 and what we plan to do in 2014-15.

What we said we would do	What we did in 2013-14 and what we plan to do in 2014-15 and beyond
Continue to work with the specialist midwife for substance and alcohol misuse for women using drugs and alcohol during pregnancy	In 2013-14, we: <ul style="list-style-type: none"> • Funded two specialist midwives at Hackney University Hospital In 2014-15, we will: <ul style="list-style-type: none"> • Continue to fund specialist midwives
Increase the percentage of people successfully completing drug treatment to 14% in 2013-14	During last year: <ul style="list-style-type: none"> • More people completed treatment and stayed off drugs for at least six months. Between October 2012 and September 2013, 223 people achieved this, 15% of those discharged from treatment During 2014-15, we will: <ul style="list-style-type: none"> • Increase the number of people completing treatment drug free by 38% • Link more funding to services to achieving targets such as completing treatment
Increase the percentage of people successfully completing alcohol treatment to 26% in 2013-14	During last year: <ul style="list-style-type: none"> • 156 people successfully completed treatment for alcohol misuse, 27% of the 583 people who underwent treatment In 2014-15: <ul style="list-style-type: none"> • We will use a new £250,000 Sports Relief grant to develop innovative ways to help people stay alcohol free
Continue to host Alcoholics Anonymous (AA) and Narcotic Anonymous (NA) meetings	In 2013-14, we: <ul style="list-style-type: none"> • Hosted weekly AA and NA meetings at DAAT services especially in the evenings and weekends These will continue in 2014-15

What you told us

During the last year we have consulted people who use services to get their views on what we provide now and what they would like to see in future.

We ran a consultation event with service users on our plans for a new integrated drugs and alcohol (substance misuse) service.

What you said	What we have done and what we plan to do
The new service needs a very good assessment tool to draw out the varying needs of people with both drug and alcohol problems	We plan to make this a fundamental part of the design for the new service for late 2015
Staff at the first point of contact need to be well trained, empathic and be skilled to assess both drug and alcohol misuse	We agree, and plan to address this in the design for the new service for late 2015
The model needs to fit the person and where they are in the cycle of change and not just force people into recovery when they are not yet ready, only for them to relapse	This will also be part of the design for the new service for late 2015
Service users should not be asked to 'come back the next day' or the day after when they attend drop-ins as you risk losing the client and they won't resurface until they are very ill, often costing even more money	We agree and will address this in the design for the new service for late 2015
Funding for detox and rehab needs to be protected as for some people it is the only way they have been able to become abstinent	It is hard to make solid commitments in the current funding environment. We agree detox and rehab are fundamental to the new service, and will look at how these services work with GPs
An appealing aspect of this new model is that it will cut the number of years someone is on a 'script' when clients can become despondent and unable to envisage life off of their substance of choice	We agree this is not appropriate and have already limited GP methadone prescribing to practices who work within a shared care agreement
Another appeal of this model is the aim to reduce the confusion about where to go if you have a problem with drugs. New clients can become confused as there are so many places they can attend	We agree, and again this is a key design principle for our new model.

What you said	What we have done and what we plan to do
Some people need support for longer because of their mental and physical health needs. Will the new system take account of these people?	The new service will not cater for these needs so we will make appropriate referrals to mental health services and there will be a clinical hub to work with these users
Aftercare needs to be supported and heavily resourced as it is one of the most important parts of recovery, however it always seems to be missed or is reliant on volunteers, which is not always the best way. The group would like to see more self-help peer supported groups.	There will be a recovery hub within the new service model. We agree it is a critical part of the treatment system

Support after rehab

During the local account consultation, people asked for information on aftercare and support available for people leaving drug and alcohol rehab to be included in this year's account.

In Hackney, people are encouraged to think about what they plan to do after rehab at their care review meeting. If they plan to move back to Hackney after treatment, the Lifeline aftercare co-ordinator meets them when they are discharged and explains the activities and support available which include:

- Education training and employment
- Football team
- Music
- Hackney's mosaic project
- Gym and fitness
- Volunteering opportunities
- The Hanbury Project

Others services that help support recovery

Sporting activities

150 people with substance misuse issues took part in a Service User Olympics in London Fields in 2013. The event gave people a chance to think about their physical health and work on their addiction issues.

Volunteer gardening

People who use substance misuse services are volunteering at local parks and green spaces in the borough to brush up their gardening skills.

Peer support

Service users set up the 'COG', a peer support club open to people who want to change to help alleviate boredom, a common trigger for relapse. Choices, a peer support group set up five years ago with Spitalfields Crypt Trust, also continues to support people who particularly struggle with abstinence over the weekends.

Carers' support group

This is a mainly peer-led group set up by a complementary therapist who provides 1-to-1 complementary therapies. City and Hackney Carers Centre also provides practical support to carers.

Useful links and contacts



Hackney DAAT

www.hackneydaat.org.uk

Hackney Lifeline project

www.lifelineprojecthackney.com

Alcohol Recovery Centre, Tudor Grove

020 8985 3757

If you would like to receive a printed copy of a fact sheet or one in another language or alternative format, call **020 8356 3980**.

If you want to contact Adult Social Care to get help or find out more about the services available, call **020 8356 6262** or visit www.hackneyicare.org.uk