



The Experience of Mental Health Services from those with Drug and Alcohol issues

A joint Healthwatch Medway and Healthwatch Kent spotlight report

May 2024







Introduction

This report highlights the challenges that those who have drug or alcohol misuse issues have in accessing mental health support services.

This report uses a case study of Brian, a 60 year old man who is unable to get a memory assessment due to alcohol abuse as a case study together with supplementary feedback gathered by Healthwatch Kent, Healthwatch Medway and Mental Health Voice in the past 12 months.

Information on Brian's situation was provided by the Forward Trust Medway and Pathways to Independence Medway.







Case Study - Brian's Situation

Brian (name pseudonymised) is a 60 year old man who has been living in supported accommodation provided by Pathways to Independence Medway for the past 3 years. Brian was homeless prior to moving into this accommodation and is deemed vulnerable due to frequently being coerced to giving money to people he meets in the community.

Brian is an alcohol dependent who consumes around 4–5 units on a daily basis. He does on occasion consume enough to become intoxicated but this is not a frequent occurrence. He does not display aggressive behaviour towards staff and members of the community even when intoxicated. A recent examination by Social Services and Forward Trust recorded his blood alcohol level at 0.08%.

Brian is on medication for several different health issues. This includes medication to treat anxiety, a heart condition, a Vitamin B12 deficiency, nausea symptoms and to prevent seizures. He receives care 3 times a day by carers provided by Medway Council. The carers ensure that Brian takes his medication, has a cooked meal each day, helps with washing and supports him doing his food shopping. Due to safeguarding concerns around money, part of Brians money is controlled by Social Services to ensure that it is spent on rent, food and other necessities.





In the past year Brian has displayed cognitive issues. This has included forgetting to take his medication, occasional bouts of incontinence and a poor memory.

Additionally Brian has been increasingly unable to understand the situation he is in, leading to him making inappropriate comments to his carers, making a series of unrelated jokes when being informed of a close friends death and a heightened vulnerability to giving away his money to those around him, where other residents at Pathways to Independence labelling him as a "soft touch". Both when drinking and when sober Brian is also increasingly unstable on his feet when walking.

<u>Timeline of accessing services</u>

Brian has been involved with social services to receive care, the Forward Trust Drug and Alcohol service and the Medway Community Mental Health Team for Older People. Brian has been refused for a memory assessment by the Community Mental Health Team on the grounds of his alcohol misuse.

Brian was originally referred by his GP for an assessment by the Community Mental Health Team in October 2023. The assessment request was rejected by the Community Mental Health team on the grounds that Brian was "consuming alcohol in excessive amounts" and that an assessment can only be made when Brian has abstained or remained within the recommended limits for a period of 3 months. Both Social Services and Brian's GP decided to not appeal this decision.





Pathways to Independence, Brian's, accommodation provider, did choose to appeal this decision on the 15th December 2023 on the grounds that Brian's most recent recorded blood alcohol content was 0.08% and that an assessment and possible diagnosis would be instrumental in finding Brian suitable long term accommodation.

A capacity assessment was also carried out by Social Services and the Forward Trust where it was deemed that Brian had the capacity to make a decision to drink or not drink, but did not have the capacity to appropriately care for himself so a care package was implemented.

This appeal was rejected by the Community Mental Health Team on 20th December 2023, which acknowledged there was "evidence suggestive of cognitive impairment, word finding difficulties, incoherent and irrelevant responses during communication" but that it could not provide an assessment with Brian's current level of alcohol use.

The Community Mental Health Team signposted Turning Point Drug and Alcohol Support to reduce the level of alcohol. It should be noted that Turning Point had been replaced by Forward Trust as the commissioned Drug and Alcohol Support Service Provider in Medway in April 2023, so the signposting by the Community Mental Health Team was several months out of date.





Brian had already been within the Drug and Alcohol Service provided by Forward Trust before the unsuccessful referral for a memory assessment with the Community Mental Health team. Forward Trust were unable to work with Brian due to his unwillingness to reduce his alcohol consumption, and his case was closed following several home visits and continued refusals from Brian.

Brian's current situation

Brian has still been unable to get an assessment for his memory and cognitive issues. He has been re-referred into Forward Trust and his case re-opened to see whether they will be able to work with him to reduce his alcohol consumption.

There is no clear pathway for progression and for Brian to be housed within more suitable accommodation as his care needs increase. Pathways to Independence typically house their residents on a short term basis for 2 years, whereas Brian has been in their accommodation for 3 years.

The commissioner for Pathways to Independence has agreed that they can continue to house Brian as they are the only service that is providing Brian with the support he needs, which without Brian could be forced back into homelessness. As Brian's symptoms worsen, there is concern from Pathways to Independence that he will require 24 hour care which is not a service they can provide nor facilitate.





Brian's situation is demonstrative of the challenges that those with alcohol or drug addictions face in getting Mental Health support and assessments. Despite being involved with several different commissioned services, Brian is still unable to receive a memory assessment and is in accommodation unsuitable for his growing care needs.

The refusal of the Community Mental Health Team to assess Brian while they noted his suspected cognitive impairment is preventing him from being able to access better care and accommodation with the correct diagnosis. Additionally the incorrect signposting to the former Drug and Alcohol Support Service shows that the correct information isn't always being provided.

Social services have been involved in providing Brian with carer support and have recognised that a diagnosis for Brian would open up avenues for him to be placed in more suitable accommodation, but have been unable to provide holistic support in helping him through a pathway.

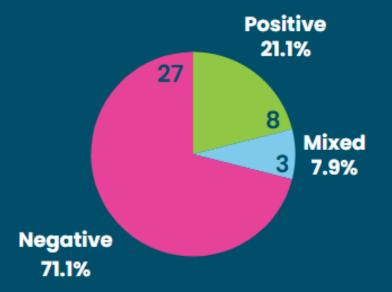






<u>Supplementary Feedback</u>

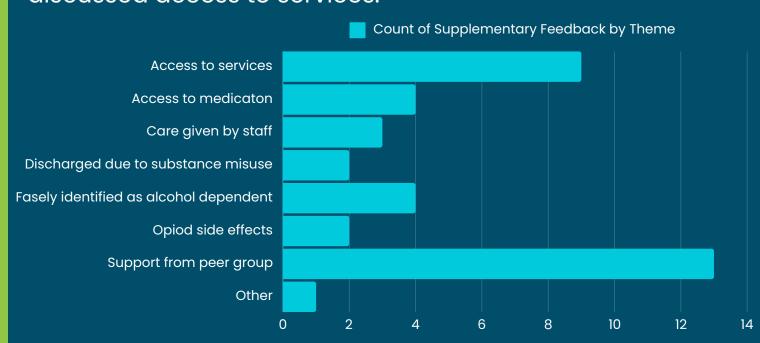
In the 12 months
between March 2023
and March 2024
Healthwatch
Medway and the Kent
Medway
Voice received 38
unique pieces
of feedback on



substance misuse and interaction with mental health services. Of this feedback, eight pieces had a positive sentiment, 27 pieces had a negative sentiment and three pieces were mixed.

Of the 27 negative pieces of feedback 33% related to access to services or being discharged from services due to substance misuse.

Of the 11 pieces of mixed and positive feedback 8 spoke about support provided from a peer group, and 2 pieces discussed access to services.







Supplementary Feedback

13 pieces of feedback mention the feeling of being in a cycle of abusing drugs or alcohol, for example one piece of feedback notes:

"I was seen by the crisis team after taking an overdose. The person I spoke with said there was nothing they could do due to substance misuse issues. I abuse substances because of my poor mental

health. How do I break the cycle without

mental health support."

Nine different service users have noted that their poor mental health and drug or alcohol issue influence each other, and being turned away and not being able to access mental health services has led to them not tackling their drug and alcohol problem.

"I was referred to [a CMHT] last year. They refused to support me due to substance misuse. I need help with my mental health to come off substances. There needs to be more joint-up working with a holistic approach."





We have received seven pieces of feedback that spoke of being unable to access mental health services due to drug or alcohol abuse also commented that mental health services were unwilling to get involved even if the individual had reduced their consumption of drugs or alcohol. For instance:

"If people are proving that they are helping themselves by cutting massively down on substances, they should be able to access a service if they need it! Services should be taking a holistic approach. I abuse substances because of my poor mental health so I need to address my mental health to abstain completely"







Even if individuals are able to become sober or reduce their consumption they can still experience difficulties accessing the right healthcare. Eight pieces of feedback mentioned that having a suspected or confirmed history of either drug or alcohol abuse has had a negative impact on how they are viewed and treated by clinical staff. This includes treatment and diagnosis for either mental health or physical health. Examples of feedback we have received on this include:

"A friend of mine, who had struggled with addiction [and] is now in recovery and working, went to their GP many times... Both they and I feel they weren't listened to because of their history as an addict"

"I had a psychiatric review with [a doctor a month ago], who sent me an outcome letter full of mistakes, misunderstandings and misquotes."





Within the feedback that we have received, 13 pieces were on experiences in using Peer Support Groups. Six pieces were positive, with common themes of these feedbacks being that the peer support groups are informative and providing an understanding environment. Examples of these include:

"I attend the life after addiction group run by [a voluntary sector organisation], which I find extremely helpful. It is refreshing to receive some mental health support. It also helps that the group is run in a space that I feel safe"

"I attend the women's group at [a substance misuse support charity]. I find this group really beneficial. It's nice to know there are people in the same boat. I felt so ashamed of being an alcoholic. This group is empowering. It gives me a place to be able to speak freely without fear of being judged"





With seven pieces of feedback on peer support groups that were either mixed or negative in their sentiment. Shared themes within this set of feedback are predominantly around poor documentation or services not running frequently enough:

"... I received a fist full of leaflets of useless information, because I cannot access [peer group] support because the personality disorder peer support group meetings are weekday [in the morning]. I am not happy doing remote video calls and I am not interested in social events, which is all [the organisation] provides in the evening. I also did contact [another voluntary sector organisation] and received the same answer - they cannot provide any help as I work weekdays nine to five."

"[A substance misuse support charity] are useless. They have not been logging my notes appropriately. [Another service asked them] for the notes and they didn't have any."





If you would like to chat with us about the report you can reach us through the following routes:





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By Text:

Text us on 07525 861 639. By texting 'NEED BSL', Healthwatch's **British Sign Language interpreter** will make contact and arrange a time to meet face-to-face



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