SUBSTANCE MISUSE

Southampton's current Substance Misuse Services have been incrementally developed under the strategic direction of the Drug Action Team Partnership and the Tackling Alcohol Partnership since 2000. Alcohol services have recently been extended and improved via QIPP.

The majority of services are currently commissioned and coordinated by SCC/ ICU in partnership with CCG with funding transferred from Public Health and the Police and Crime Commissioner. A new Integrated Drug and Alcohol Substance Misuse Service is currently out to tender and

Current Services:

should be in place by the end of July 2014.

ALCOHOL

Southampton Alcohol Brief Inventions and Counselling Service, run by CRI, is the first point of contact for anyone concerned with their or someone else's alcohol use whether mild to moderate dependence, binge drinking, severe dependence or with complex needs e.g. mental health, child protection, vulnerable adult.

All service users requiring medical interventions such as community or residential detoxification or residential rehab will be referred on to the New Road Centre.

The New Road Centre

Provides support for more dependant and complex clients they receive referrals from SABICS, Social Services and other specialist substance misuse and mental health services

The services at The New Road Centre are provided by Southern Health NHS Foundation Trust

Alcohol Specialist Nurse Service

A specialist team working in Southampton General Hospital (UHST) receiving referrals and proactively identifying problematic drinkers attending hospital offering support and onward referrals

Alcohol Day Detox Service (Solent Healthcare)

Taking referrals from SABICS, New Road Centre and ASNS **only**, ADDS provides medically supported alcohol detoxification in the community

Community Wrap Around

Providing and coordinating a wide variety of support and peer support in the community for people concerned by their alcohol use.

Community Wrap Around Services are provided by The Society of St James

DRUGS

The Bridge is open six days a week and is the <u>first point of contact</u> for people who want help with drugs in Southampton. The Bridge offers advice and information, harm reduction, one to one and group work and referral to other services or agencies. The Bridge also provides access to Southern Health NHS Foundation Trust's care coordination and the rapid prescribing service for people who need substitute prescribing for heroin and some other drugs.

The Drug Intervention Programme (DIP) provides a similar range of services to The Bridge but is specifically for people who use drugs and who are involved with criminal justice agencies.

The DIP also provides drug treatment for a person who's Court Order includes Probation supervised **Drug Rehabilitation Requirement (DRR).**

SHARP (Southampton Harm Reduction Partnership) is based at The Bridge and has two components

Assertive Outreach Service ~ providing outreach to engage groups that are underrepresented or may need additional support to enter treatment and with service users who are struggling to remain in treatment and to re-engage with those who have dropped out.

Harm Reduction ~ As well as the provision of sterile injecting equipment (needle exchange services) **SHARP** provides advice, information and care to reduce the harm of taking drugs including safe injecting techniques, alternatives to injecting, wound care, BBV testing and inoculations, health checks and referral to further treatment services.

The service also offers a specialist needle exchange service for steroid users.

SHARP also works with a number of pharmacies and hostels in the City to offer Needle Exchange and Harm Reduction Services

YOUNG PEOPLE

DASH Youth Drug and Alcohol Project offering confidential support and advice for drug, alcohol or solvent problems to anyone under 19 years who lives in Southampton

FAMILY and CARER

Parent Support Link

A support service for anyone concerned by someone else's alcohol or drug use

Druas

Recent adult prevalence rates of Opiate and/ or Crack users are estimated to be 1,707

Alcohol

Increasing risk Higher risk

21 units to 50 units for a man

Men who regularly drink over 50 units per week

14 units to 35 units for a woman.

Women who regularly drink over 35 units per week.

31,519 10,413 40,249 12,701

Size of the problem

32% of new presentations to drug services (YTD Q3 2013/14) report a housing problem

NFA - urgent housing	10%	35
Housing problem	22%	72
No Housing problem	68%	220

16% of new presentations to alcohol services (YTD Q3 2013/14) report a housing problem

NFA - urgent housing	1%	3
Housing problem	16%	50
No Housing problem	81%	244

A snapshot from the Street Homeless Prevention Team (SCC)

Street Homeless Prevention Team engagement

Outreach Q3 2013/14

Total number of individuals engaged 41 Class A drug users 18 (45%)

Hostel referral Sessions (Feb 2014)

Total seen 78

Number with "drug issues more serious that cannabis" 20 (26%)

Dual Diagnosis Snapshot

Snap shot view of Homelessness Services Drug Use (Dec 13)

HOMELESSNESS SERVICES RESPONSES	PATRIC K HOUSE	SOTON ST.		BOOTH CENTRE		TOTALS
Service user has a dual diagnosis of mental health and alcohol/substance use	24	7	18	13	15	77

<u>Issues</u>

Recovery

Risk of relapse is raised if suitable, stable accommodation is not available to a person in recovery People discharged from prison with no suitable, stable accommodation Substance Misuse as a factor in risk of eviction

- Support initiatives to increase abstinent and supported accommodation for people with a history of substance use
 - o IOM houses
 - Alcohol Accommodation Tender
- Substance Misuse Awareness training
- Floating support for those at risk of losing tenancy

Overdose

Historic significant incidence of overdose and "near miss events" in hostel accommodation

- Continued support of access to Naloxone and associated training
- Continued effective joint working between Substance Misuse Services and services for people at risk of or currently Homeless

Blood Borne Virus

The sharing of contaminated injecting equipment presents a significant risk of BBV infection. The burden of undiagnosed Hepatitis C, in particular, presents significant health costs.

- Develop interventions to encourage hostel residents to access testing and treatment for BBV
- Support initiatives to provide harm reduction equipment, advice and information, across our services for people engaging with homeless services.