

Huggard's Update to Inform the Welsh Government Inquiry into Rough Sleeping: November 2019

1. Introduction:

1.1 Huggard's purpose is to tackle homelessness and improve individual wellbeing.

1.2 Our Values:

- To provide safe spaces for visitors, residents and staff that meet the needs of, and provide opportunities to, people who have experienced homelessness.
- To be welcoming and provide environments that are psychologically informed, recognising that many of the people we work with have experienced trauma in their lives.
- To support people by providing emotional and practical help based around person centred services.
- To empower staff, and those that use our services, recognising and developing strengths and personal capacity so that those using our services can live more independently and sustainably.
- To work collaboratively with those that use our services and with partners to maximise opportunities and resources.
- To continually improve what we do, adapting to changing needs, managing opportunities and avoiding complacency.

1.3 Huggard runs a low threshold Day Centre for people that are experiencing homelessness. People access the Day Centre to take advantage of high-quality cooked meals, washing/showering and laundry facilities and a clothes store as well as to take advantage of specialist services focussing on advocacy, benefit advice and support, personal/social development and substance misuse support.

1.4 The centre provides a hub and a place of engagement for people who are experiencing homelessness or need support to maintain or secure accommodation. Most people using Huggard's Day Centre are either sleeping rough or in emergency or temporary accommodation.

1.5 From April through to the end of September 2019, Huggard's Day Centre saw 12,579 visits from 827 individuals compared to 10,351 visits from 797 individuals over the same period in 2018.

2. Current Situation with Regards to Co-occurring Substance Misuse and Mental Health Problems among People Sleeping Rough:

- 2.1 Huggard provides a psychologically aware support service for people sleeping rough with substance misuse issues alongside providing a Needle Syringe Programme 24/7. Our needle exchange is the busiest across Cardiff and the Vale and the provision of harm reduction services provides access to support services to many individuals who are not engaging with any other service. It provides an ideal opportunity for brief intervention work for people who are in the pre-contemplation stage of engaging in treatment services.
- 2.2 We recognise that many of the people that use our substance misuse services have co-occurring mental health issues. Huggard's substance misuse co-ordinator has an MSc in Health Psychology and we seek to ensure that the service is both trauma informed and sensitive to the mental health needs of clients. This service provides 1-2-1 sessions following a person-centred care plan approach to address their substance misuse.
- 2.3 Huggard also works with Cardiff Council's Multi-Disciplinary Team which employs a specialist substance misuse worker and a trained counsellor. The counsellor provides regular drop in sessions within Huggard's Day Centre. This provides an opportunity for us to help clients with co-occurring mental health and substance misuse issues within an open access, low threshold, environment.
- 2.4 Outside of Huggard services, and from our experience to date within Cardiff, there are services available that can help individuals who experience issues with either substance misuse or mental health, however, we do not have an integrated service that delivers support for both. This often leads to mental health services not accepting referrals because the individual is using substances. This is a real problem for our client group who often present with a co-occurring substance misuse and mental health issue, and thus are not receiving the support they really need.
- 2.5 For our clients the services available for **substance misuse** include:
- Entry to Drug and Alcohol Services (EDAS): There is an EDAS worker that is based within the MDT that Huggard links in with and who will attend the Huggard to support people to get a quick assessment to be referred to treatment services. We also support those who are less chaotic to attend drop-in clinics with EDAS based on St Andrews Place, again to complete assessments to be referred to treatment services. Even though this is a quick propose, the treatment services have long waiting lists.
 - Community Addictions Unit (CAU): Accept referrals from EDAS. They offer maintenance prescribing for opiate dependent individuals and detox programmes for those dependent alcohol. This includes group work, in preparation for completing a detox. Although we value this service, the waiting lists for even a first assessment to gain a substitute opioid prescription have been as a high as 20 months. This is not effective for our client group, where

motivation can often be fleeting and where services need to act quickly when someone is ready to make change.

- Dyfodol: Offer maintenance prescribing for opiate dependent individuals who are engaged with the criminal justice system. They are piloting a Rapid Access Prescribing Service (RAPS) which offer a much quicker route to prescribing. However, this can still take 2 – 3 weeks. Again, we would argue that prescribing needs to be quicker.
- Taith – Offer psychosocial support including 1-2-1 and group work for those looking to make a positive change with their substance use.

2.6 For mental health:

- Individuals can be referred to the Community Mental Health Team. However, we are unable to refer in. Referrals must be from that person's GP, which can often be another barrier to engaging with mental health services.
- Cardiff MIND: Offer group work, 1-2-1 and counselling. We have referred clients to this service.

2.7 As great as the above services for both substance misuse and mental health are, they try to implement structure to an often chaotic cohort of people. At Huggard we try to support individuals to navigate the often complex systems in place. This can include liaising with the other services, recording appointments time and dates and providing reminders and even support to attend such appointments.

3. How can Services be Delivered More Effectively to Address the Specific Needs of People Sleeping Rough?

3.1 **Training:** Substance misuse services should be better trained to recognise and support clients with mental health issues and conversely mental health services should be better trained in supporting clients with substance misuse issues so that, for clients with co-occurring substance misuse and mental health issues, services take a 'no wrong door' approach.

3.2 **Enhance Low Threshold Support:** outreach and open access services provide unparalleled opportunities to engage with people sleeping rough with co-occurring mental health and substance misuse issues. This opportunity needs to be better embraced with additional resources to support brief intervention work.

3.3 **Fast Tracking:** for clients with a long history of mental health and/or substance misuse issues there should be a facility to grasp fleeting opportunities for immediate referral into treatment and prescribing services.

3.4 **Direct Referral:** appropriately trained specialist substance misuse staff should be able to refer directly to the Mental Health Team without the necessity of going through a GP service which can represent a further barrier that an individual with a chaotic life may not be able to manage.

3.5 **Flexibility:** recognition that clients with complex and chaotic lives need support to undertake often simple tasks. Services that need to work to a given structure may, by their very nature, put up barriers. Services need to take a psychologically informed and trauma aware approach, recognising that people sleeping rough may miss appointments or may need to access services at unspecified times. Services should try to take this into account and avoid, where possible, closing cases due to missed appointments or being too rigid in their working practices. This could include working in more accessible venues such as Huggard's Day Centre when this can support better engagement.

Richard Edwards, Huggard Chief Executive, November 2019.