

Putting the carer voice at the centre of the design and delivery of alcohol, drug and homeless services

Reducing Harm, Improving Care

November 2022

The Reducing Harm, Improving Care programme aimed to understand the barriers to accessing drug and alcohol services by Homeless people.

This case study will show how carers and family members were involved in the programme to understand their role in supporting people to use drug and alcohol services whilst considering the impact of this involvement on them as individuals.



“ It has been invaluable to learn how crucial family member involvement is, in helping a loved one to navigate a complex system.

Without the support and encouragement of loved ones people fall through the gaps of service provision.

Julie Davidson,
Involvement Advisor



Key carer issues identified:



The significant emotional and physical burden on the carers and families who support a loved one to access alcohol, drug and/or homeless services



Stress and anxiety caused by difficulties in accessing services to get help.



Little or no support mechanisms in place for family members and carers from statutory services



Carers and families need more support to navigate a complex system

Background

Reducing Harm, Improving Care worked with Alcohol and Drugs Partnerships (ADPs) and statutory homeless services in four health and social care partnership areas to understand the current system and identify key considerations for future services' design and improvement.

Through a multidisciplinary team, the programme blended the methods of strategic planning, service design, quality improvement and user involvement to understand the experiences of people who use services alongside those who deliver them, to help design improvements which focus on what matters most to people.

The team were keen to include the voice of carers and family members within their approach and recognised the significant impact and role they played in supporting people to access services.

Approach

Carers and family members participated in the programme in a number of ways:

- The national support organisation, Scottish Families Affected by Alcohol and Drugs (SFAAD) were members of the programme advisory board and were able to identify engagement opportunities and link the programme with other organisations and with carers they support.
- Staff from four third sector organisations participated in a focus group to share their experiences of supporting carers and the key issues carers experienced. Staff represented the following organisations:
 - Scottish Families Affected by Alcohol and Drugs
 - Phoenix Futures
 - Turning Point, and
 - Voice of Carers Across Lothian (VOCAL), Edinburgh.
- Individual interviews were held with staff to enable deeper conversation and to capture learning on issues specific to their area of support.
- Collaboration with SFAAD to have conversations with a carer and capture her detailed experience of supporting her former husband for 12 years as he accessed ADP and homeless services.

Impact

The involvement of carers and family members has had direct impact on the design and delivery of the Reducing Harm, Improving Care programme and has also influenced other programmes across the ihub.

The value this added

- Increased understanding of the barriers faced in accessing services
- Addressed challenge for families and carers to achieve holistic care coordination for their loved ones.
- Highlighted the value in supporting carer and family involvement and why this improves positive outcomes for people who use alcohol and drugs and experience homelessness.
- Highlighted importance of involving people with lived experience as equal partners in service design.
- Design and development of accessible resources to highlight learning from carers for those designing and delivering services. These include:

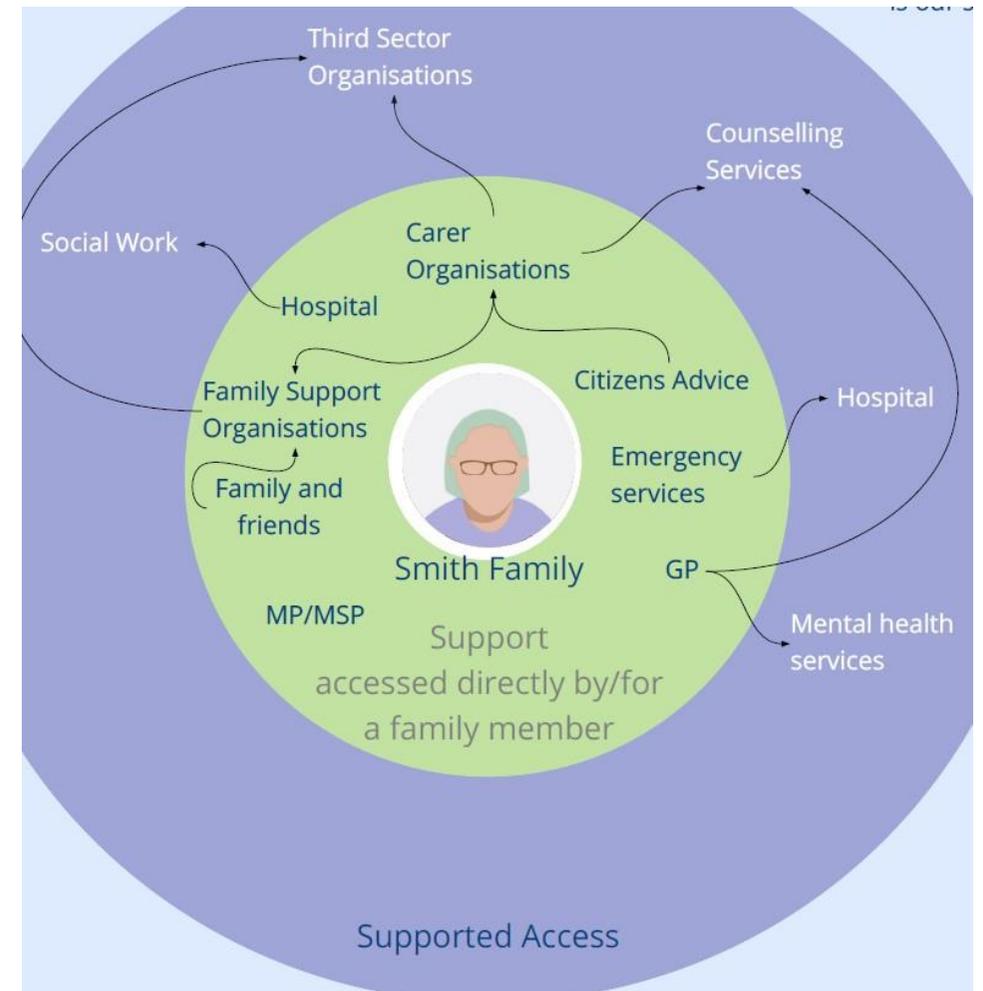
Next Steps

A new commission from Scottish Government in relation to Residential Rehabilitation pathways has explicit ambitions to ensure the views and experiences of families and carers are included. This is reflected in our Equality Impact Assessment and our involvement planning.



Working with SFAD brought us an understanding that family members need their health, wellbeing, and support to be considered alongside family members who are accessing services.

[RHIC Report – Involving people with lived and living experience of alcohol, drug and homeless services, September 2022](#)



Demonstrating Impact - Outputs

- A [User Experience Map](#) which visually demonstrates the-- often invisible--contribution of loved ones, and highlights the multitude of referral pathways they experience in seeking to support their family members to access essential care.
- A [Family Case Study](#) which illustrates the value of services including loved ones in conversations about care and treatment to support recovery and respond quickly to relapse.

Key enablers

- **Partnership working with the third sector and membership organisations**
Taking the time to build relationships with key third sector organisations developed trust that engagement of lived experience would be meaningful for everyone. This enabled the opportunity to engage directly with a carer to capture their story.
- **Recognising the lived experience and expertise of the workforce**
Third sector staff brought invaluable insights and often shared personal as well as organisational learning. Staff shared stories that demonstrated how anyone can be affected by these issues and brought the 'human element' to conversations.
- **Dedicated Involvement experience and expertise**
The Reducing Harm, Improving Care team included a dedicated Involvement Advisor. This role brought additional capacity and expertise to build relationships and facilitated engagement with the people who use services and those who love them.
- **Value in acknowledging lived experience**
The Reducing Harm, Improving Care team shared lived experience, at points, which helped to build trust that the work was authentic and as a team we were non-judgemental.

Opportunities for improvement

- **Many people may not recognise themselves as 'carers'**
Family members and friends supporting someone to access services may not see themselves as 'carers'. Using broader language and being more proactive when identifying carers may be necessary.
- **We were able to identify gaps in services caring for carers and family members**
Carers and family members experience stress and anxiety not only supporting their loved ones but also when navigating systems for support themselves. There is a particular gap in support for carers in statutory services, which was highlighted as a key opportunity for improvement.

Further information

Find out more about the work of the Housing and Homelessness in Healthcare team on their [webpages](#).

The Unpaid Carers Improvement Programme is part of Healthcare Improvement Scotland's Improvement Hub ([ihub](#)). Visit our webpages to read more about our improvement work, including further impact stories, on our [webpages](#).