Change Grow Live St Luke's Service Barking and Dagenham

Summary of initiative

St Luke's service is the commissioned community drug and alcohol service offering a trauma-informed approach working with adults over the age of 18. The service offers:

- Advice and support
- An experienced team of recovery coordinators, nurses and doctor
- Employment and training support
- Links to recovery coaches, community fellowships and support from people who share similar life experiences
- Counselling
- Connections to a range of local partners in the care sector and the NHS
- Naloxone a drug that can stop the effects of an overdose.

There has always been an emphasis on giving naloxone to opiate service users as part of the harm minimisation advice provided, however this was based on a voluntary acceptance approach which resulted in a low take home rate. Some of the reasons for this were service users feeling that they smoked opiates and so were not the same as injecting service users, an assumption that those being released from prison had been provided with naloxone and a fear of challenge from service users.

Who we worked with and how?

As a service and all staff, we took a targeted approach reviewing data of those who had offered and accepted, those who declined and those who already had been provided with a kit, having an opt out system, and offering training to friends and families, raising the awareness with partners (such as police, pharmacies and other agencies) of the importance of the medication and its reversal effects from overdose.

How was it set up? Any challenges and how we overcame them

Changing the approach and language used at assessment and every interaction, we ensured that all opiate service users were provided with naloxone once they attended the service. There was an increase in the uptake of naloxone, but we still faced resistance from those who felt that they did not socialise with service users who were still using illicitly or did not feel they needed it. There were lots of conversations, not just on how it could be used to save their life, but around how they could possibly save someone else's life. During the COVID-19 lockdown, most of the service users we spoke to knew someone wo had overdosed, and, in some cases, they had used their kit and came to request more.

Outcomes achieved

As part of the harm reduction offered to service users and, considering the information and guidance received from PHE on the batches of contaminated heroin resulting in service users overdosing, the service adopted an opt out guidance to receiving naloxone. All opiate service users were trained and provided with naloxone and the offer was made to anyone they knew who needed it. The service provision is 100% - all opiate service users have been provided with naloxone. This is constantly monitored, and service users are aware if they know anyone who needs the medication they can come in and be trained and provided with a kit.