



A **healthwatch** York report for the

York Multiple Complex Needs Network



The MEAM Approach

Helping areas design and deliver coordinated services

Support for people experiencing issues across homelessness, mental health, substance misuse and offending.

September 2020

A report based on local peoples' experience

Contents

Support for people experiencing issues across homelessness, mental health, substance misuse and offending in York	3
Introduction	3
Why is York MCN Network looking at people’s experiences of support in York?	3
What we did to find out more	3
What people told us	4
What people said – in more detail	5
Responses from MEAM Workers	12
Appendices	15
Appendix 1 –. Questionnaire	15
Appendix 2 - What is MEAM?	16
York Lived Experience Group	17

Support for people experiencing issues across homelessness, mental health, substance misuse and offending in York

Introduction

This report presents the results of a York Multiple Complex Needs (MCN) Network survey looking at support for people experiencing issues across homelessness, mental health, substance misuse and offending in York, focused on the experiences of those supported through the MEAM (Making Every Adult Matter) approach. This is delivered in York by Changing Lives. This is a small scale pilot, to see if a survey like this provides useful insight.

Healthwatch York are part of the Network, working alongside people with Lived Experience and others to keep people's experiences at the heart of everything the Network develops. Healthwatch York worked with the Lived Experience group and the MEAM manager to develop plans and write the survey, and has collated the feedback on behalf of the Network.

Why is York MCN Network looking at people's experiences of support in York?

York MCN Network includes people who use, deliver and oversee services that support people who face issues such as homelessness, alcohol or drug problems, mental health problems and offending, especially where their lives are complicated.

Everyone in the Network believes we could do better when it comes to supporting these people. So we want to understand what people facing these issues believe that better support would look like.

What we did to find out more

Members of the Network's engagement group agreed to use a short survey to try and understand what is working well, what doesn't work, and what's missing. MEAM workers provided copies of the survey to people who wanted to complete it themselves, and sat down to interview others who preferred to give spoken replies. We received 17 responses in total. 2 MEAM workers also completed the survey.

What people told us

- Housing is vital, people want to feel safe in their own home as quickly as possible and make it homely
- Hostels, including bail hostels, are not a great environment for many people
- People report poor access to mental health services, and want a walk-in centre for other health issues
- Lack of social activities and meaningful ways to fill time; fears of boredom; links with difficulties staying clean / sober
- Importance of holistic and joined up 1-2-1 support and positive relationships with support workers
- The importance of getting help with managing day to day life
- Feeling judged and never being able to leave your label behind; issues around self-confidence and self-worth
- Importance of access to IT, with some people struggling to use it
- Transitions are difficult, and people often lose support that they value at times of transition because it is tied to a particular state, such as homelessness
- People mostly value the support they receive

What people said – in more detail

Housing is vital, people want to feel safe in their own home as quickly as possible and make it homely

“Housing first is better than living in hostels around everyone else problems.”

“Homelessness is a big issue how can other issues be addressed when no roof over the head.”

(What’s too hard is) “waiting for a flat.”

(What’s too hard is) “decorating my flat.”

“I have got my flat which I have always wanted. Without any help I would still be stuck in hostels.”

“Getting my gaff has meant everything to me. All I want to do now is keep my gaff nice and see my mum.”

“Getting put in this place (a B&B). I don't have to hang around with people that I don't want to be around.”

“I can't wait to get my own place and it won't be long now. Everything is wicked at the moment.”

“The condition of the council flat I moved into was not suitable to live in as it did not have carpets and quite a mess in terms of walls, floor etc.”

“Help having settled room, on crash pad but not properly settled.”

“Having suitable housing (preferably my own flat.)”

(What’s missing is) “a safe place, secure accommodation”

(What’s missing is) “flats - I know loads that don't have flats.”

Hostels, including bail hostels, are not a great environment for many people

“Bail hostels. Southview - I said when I was released from prison I didn't want to go in Southview. It was like Big Brother with all the cameras in

that place. They treated us like kids, when I used to get in they would breathalise me every time. I nearly got recalled because of that place.”

“Hostels are like crap hotels bog roll and meals provided at a cost no other real support plenty of judgement.”

“Hostel accommodation really didn't help me, been in and out of hostels since I was 16 and I never got close to getting a flat but now I'm out that setting I'm doing really well.”

“Living in hostel environments does not work well for me, especially when trying to stay away from drugs.”

(What's too hard to do is) “living in hostel environments, especially Union Terrace.”

“I don't like hostels, but maybe that's just me. I can never seem to cope in hostels and I know that's my own fault as I do stupid things or get into relationships that are bad for me.”

“Hostels don't feel safe like you're set up to fail and be made homeless again.”

“Sometimes staff can be lazy at the hostel.”

People report poor access to mental health services, and want a Walk-In centre for other health issues

(What's too hard is) “speaking with someone from mental health team. Can't even get an appointment.”

“Mental health - not any help at all. Get injection but that's it. Whether there is help but too busy.”

“Can't ever speak with mental health team. Don't want to say anything though”

(What's missing is) “mental health services.”

“Mental health services are really bad, their waiting list for a CPN is ridiculous.”

“Mental health needs to be better to access and support.”

“Mental health services could be improved. Now have a mental health social worker who is helping me get a placement in a rehab.”

(What’s missing is) “drop in services - somewhere like Monkgate is missing”

(Good stuff we’ve lost) “Monkgate Medical Centre - I used the service a lot before it closed.”

(What’s too hard to do) “At the moment everything due to health issues.”

Lack of work and social activities and meaningful ways to fill time; fears of boredom; links with difficulties staying clean / sober

“More job opportunities for people like me. I would love to do something like a mechanics course. I suppose I could go to college or somewhere and do this.”

“Structure”

“Brook drive detox (not York) has weekly outings ten-pin bowling, coffee at a cafe, trip to London dungeon as a group (sober group)”

“Drinking - I don't want to start drinking again.”

“Constantly bored - use drugs when bored”

“Housing first living in a flat can be lonely this can lead to boredom and then use drink and drugs left to their own devices. MEAM worker can't be there all the time they have other punters to see to.”

“Mentors, when you live alone it can be lonely we should have mentors who visit regularly do things go for coffee, bike rides”

“I get bored well easy.”

(What doesn't work is) “pressure from peers and not being able to stop visits.”

Importance of holistic and joined up 1-2-1 support and positive relationships with support workers

“Have had problems with agencies sloping their shoulders onto one another - IDAS, Mental Health counselling, St Mary's onto MEAM (although my newest keyworker has been much more helpful.)”

“There’s good and bad staff across all of them some are the devil some are angels its pot luck which one you end up helping you but it’s out of your hands.”

“I found working with individual services a challenge and at times unhelpful. That was until I started working with MEAM. That service helped me through the day to day and never gave up. The help and support was 5 star and by far the best service to hit York for a long time”

“You have helped me loads. Only one I can trust.”

“Blossom Street provides a good service - my relationship with my drug workers was very good. Had a great relationship with my keyworker at Peasholme - good engagement and told me how it was. Aba staff are great and have helped me a lot. My MEAM worker is a nice lady.”

“MEAM (works) because of the trust, time given and structure”

“I have a really good support network - that includes probation, bridging the gap and MEAM”

“I get help when I want it.”

“MEAM and probation services have regular contact weekly which is good for me. Things are going well to try and get me into rehab.”

“MEAM team and supported housing services work really well for you. All services work well together.”

“When all CPN / Social Worker / etc are all on same page. Knowing what goal we want. Also when you get along with a MEAM worker like I do with Chris. She makes life feel a lot easier.”

“The charities P3 and MEAM are going above and beyond. They have helped me out with any issues I have had including housing, drug and alcohol abuse, family relationships etc”

(What works is) “having someone to help fight your corner with authorities when you are feeling weak, confused, negative about your life choices if you even feel like you have choices.”

(What doesn't work is) “not all working together. Not getting along with worker. Not helping yourself. Put in what you want to get out of it.”

(What's too hard is) “Getting all my workers together to see me”

Getting help with managing day to day life

“Hands on help with prioritising own real life needs. In my case when I was homeless there are so many things I needed to do, and keeping up a drug and alcohol habit was more than a full time job.”

“Help remembering about appointments and getting there, and someone with an understanding of the systems you have to deal with and what they SHOULD be doing to help.”

(What works well is) “when I can get to hospital” (needs help with transport)

(What's too hard to do is) “filling out forms like these.”

(What's too hard is) “money - would like to go food shopping again with you.”

Feeling judged and never being able to leave your label behind; issues around self-confidence and self-worth

(What works is) “a worker who actually does their job, who you can trust, and doesn't judge in any way.”

“Putting the past behind you no matter how long you are sober or how hard you try i am still ***** the piss head other people don't let you forget”

(what's missing is) “doctors that believe me, and what I'm saying. I know when we go to the doctors they won't give me meds as they see I was a druggie. Even when I was going on with all that I never messed about with meds.”

“Lifeline play god with my script. I was two minutes late for my script and they cancelled it. How come when I get there they make me wait 20 minutes. How is that fair?”

“Nothing is too hard to do with the right support and effort from self you have to ask yourself how much do you want a better life”

(What’s too hard to do is) “believing that it's worth bothering about my self-care and surroundings.”

Importance of access to IT, with some people struggling to use it

“I know I can go to Arclight and can get help if my mobile isn't working”

“Having help financially, i.e. to buy a phone, keep it topped up.”

(What’s missing is) “access to a computer - I have a PS4 but can't use it.”

“I'm shit with computers. I know you try and teach me but I can't get my head around it.”

“Struggle using technology and other electrical equipment.”

“Things are mint at the moment. I have just been given a laptop so I can start with Oaktrees (12 steps.)”

(What’s too hard is) “lack of access to internet / tech”

Transitions are difficult, and people often lose support that they value at times of transition because it is tied to a particular state, such as homelessness

“Before I was working with this guy about my childhood and depression but that stopped. I went to prison and it wasn't available when I got out.”

“I've not seen anyone for well over a year since I worked with the CPN who dealt with the homeless and I had to stop as I got accommodation.”

“I was in an abusive relationship which although I couldn't leave was useful to me as protection as a woman on the street.”

“Problem is that I am institutionalised and don't know anything else. This is what I am used to. No suitable accommodation for me.”

People mostly value the support they receive

“You are always there for me.”

“I get support from all services and there is loads of stuff I want to do.”

“All services help me - even though I don't use them very often.”

“Most services are alright, they do try and help you.”

“All in all (my worker) and her team - I would be lost without her”

“I have found the services to have been of great benefit and helped enormously”

“Some of the places are okay. MEAM do the job.”

About the pandemic

“(What's too hard is) interacting with people. Seem to want to be on my own. Anxiety - want to go out but don't want to.”

“Leaving my gaff. Don't want to go out some days. The thought of getting on a bus with people makes me feel sick.”

Other comments

“The help of other agencies is missing. St Mary's facilities are appalling, knowingly leaving blocked toilets over the weekend, bathrooms that are disgusting. Not enough facilities in No. 27, no kitchen, walking with hot food and pans from the next door kitchen up and down stairs (some of which aren't even level.)”

(What's missing is) “meeting places when you are actually homeless.”

“Drug places are getting worse. Now I'm in groups. Can't speak to anyone and they don't care.”

(Have we lost good stuff that worked?) “When I got took off vallies. I would even go on daily pickups.”

Responses from MEAM Workers

Broadly, MEAM workers responses echoed those of people supported through MEAM. They provided feedback on housing and hostels, access to health services particularly mental health, and the importance of agencies working in partnership with each other and the person themselves. They also raised issues around processes, paperwork and waiting times.

Housing and hostels

(What works well is) “the housing first model - We have successfully placed clients in tenancies which have flourished under housing first. This is the same clients that have previously been stuck in a cycle of homelessness.’

“Some services think that MEAM can always find appropriate accommodation for our clients and they sometimes think that it is our responsibility to find suitable accommodation especially when a person is homeless and rough sleeping. We are not a housing provider even though we do help our clients find accommodation.”

“(What doesn’t work is) the lack of housing provision especially for those clients with extreme complex needs and are very difficult to accommodate. There is no suitable accommodation in York for some of our MEAM clients, which then creates a never-ending situation and clients just continue to live a chaotic life without being given the appropriate opportunities to live a ‘normal’ life.”

“Sometimes placing clients in hostel environments is clearly not suitable and this can lead to negative outcomes, especially for those who are trying really hard to make positive changes to their lives.”

(What doesn’t work is) “housing - having limited front line hostels that are classed as ‘resettlement’ but without the functionality of accommodating MEAM clients.”

(What’s missing is) “a supported house for MEAM clients. Other housing services cannot always meet the needs of the MEAM clients. Plus, not all of the clients want to live independently through housing first or they have previously been placed in housing first tenancies which have failed. In York, with around 6 to 8 MEAM clients there is a constant revolving door with (people) moving between the streets, prisons and hostels.”

Mental health and other health services

“The lack of access to mental health services for a number of our clients is very problematic.”

“(Good stuff we’ve lost) the drop in centre at Monkgate where the homeless could access medical services.”

“The hardest thing is getting mental health services to offer some kind of provision for those who have complex needs.”

(What we’ve lost is) “a mental health service specifically for the homeless.”

(What doesn’t work is) “access into mental health services and discharging clients from services. Although some services will encourage re-engagement I have witnessed other services discharging when they haven’t attended and without actively encouraging re-engagement.”

Working in partnership

“Partnership working with some of the other services across the city – does work well with most of the service providers.”

(What works well is) “flexibility of services to meet the client’s high support needs. Services such as probation, substance misuse services and in some cases mental health services have offered an alternative approach to working with clients to meet their needs.”

“When it works well, multi agency partnership work. Working collectively with the client’s best interest and working towards their end goals.”

“The levels of expertise, knowledge and professionalism across the services.”

“The commitment and levels of trust between some of the statutory and voluntary organisations.”

“Positive engagement and networking between some of the services.”

“The levels of respect and understanding of each of the service providers, especially when dealing with difficult and complex cases.”

“Most of the support services across the city work extremely well together to provide the best help and support to our clients. From working in the MEAM team this is an approach that seems to work exceptionally well because we are so flexible in our working practices and I think this work is instrumental to helping most of our clients to achieve some real positive changes and outcomes to their lives.”

“I think it’s difficult to get clients to trust other services. Clients have previously been let down from services so it’s difficult to get them to re-engage, even with a different approach from that service.”

“Some individuals agree to undertake a piece of work for a client and then do not do the work and it is left to the MEAM Worker to pick up the pieces”

“Sometimes it’s not the support service as an organisation, but the individual ethos of the worker and their investment and input in the support of a client.”

Processes, paperwork, and waiting times

“The length of time it takes for a Housing First application to be accepted and appropriate accommodation to be offered.”

“Difficulties accessing welfare benefits and the lack of understanding from the department, especially when somebody is homeless and rough sleeping, and when some people clearly do not have the skills to use technology.”

Other comments

“With the introduction of RSI I have seen a drastic improvement in rough sleepers and hard to reach clients getting support. The reduction in rough sleepers is an extremely positive improvement.”

Appendices

Appendix 1 – Questionnaire

What we are trying to do

We've created a network in York of people who use, deliver and oversee services that support people who face issues such as homelessness, alcohol or drug problems, mental health problems and offending, especially where their lives are complicated.

Everyone in the network believes we could do better, so we want to understand what you think better would look like.

What works well?

What doesn't work?

What's missing?

Have we lost any good stuff, any things that worked?

What's too hard to do?

Is there anything else you want to say about support services?

Appendix 2 - What is MEAM?

The Making Every Adult Matter, or MEAM, approach is a national framework. York is one of 31 MEAM areas across the country.

More information about MEAM nationally can be found here:

<http://meam.org.uk/the-meam-approach/>

York MEAM is a service which provides an intensive coordinated package of support to chronically excluded adults in the city. There are an identified group of adults who are living chaotic lives and have difficulty maintaining engagement with local support services. This group often have complex needs including homelessness, substance misuse, mental ill health, physical health needs, social exclusion, offending behaviour and breakdown in family relationships.

MEAM project workers provide direct one to one interventions to clients to identifying their support needs and helping to explore the barriers which have prevented them having effective engagement with services. Our aim is to find ways of supporting clients to improve engagement with existing services and encourage holistic multi agency working to develop realistic support plans to enable the clients to make sustainable changes to their lives.

A vital part of the role is to collect evidence of gaps within existing service provision and explore the reasons why traditional services often do not meet the needs of this group. We work closely with a range of local services such as probation, homelessness services, drug and alcohol teams and health care professionals to develop creative and more flexible ways of supporting chronically excluded adults to enable improved outcomes for them.

Clients often have high frequency A&E presentations, frequent arrests and short custodial sentences.

Who do we support?

Since the start of the project in 2015 we have received 132 referrals and supported 56 individuals. The project currently supports 33 individuals aged between 24 and 61, 25 are male, 8 female.

All people currently being supported

- have experienced problematic substance/alcohol use
- have spent time in custody
- experience mental ill health ranging from diagnosed conditions to self-reported
- have experienced multiple periods of homelessness
- have experienced personal trauma

15 are care leavers. 26 have no family contact or support network. 10 have disclosed involvement in sex work/survival sex

Service engagement at this time

14 are engaged with community substance misuse services

14 are engaged with NPS/CRC services

7 are currently in prison

10 are open to mental health services

8 are open to adult social care

7 are engaged with housing resettlement services

7 are deemed inappropriately housed, for example they are unable to successfully move through an existing pathway

13 are accommodated in CYC properties either housing first or gold band

York Lived Experience Group

York Lived Experience Group are part of the York Multiple Complex Needs Network, and working to establish themselves as a standalone user-led organisation. Members of the group have lived experience of homelessness, mental health issues, substance misuse and offending.

They are:

'Acting and developing the voice of experience by supporting systemic change across York'

This report

This report is available to download from the Healthwatch York website: www.healthwatchyork.co.uk