

DUAL DIAGNOSIS NETWORK

CITY OF LEEDS

Newsletter

Issue 4 - November 2008



Information on the project and the general field of Dual Diagnosis can be found on our web-site:

<http://www.dual-diagnosis.org.uk/>

Newsflash

Training & Development:

The next DD Module delivered by Leeds Addiction Unit will be running in February 2009.

The deadline for applications is 11th December and there is a limited number of places, so applying as early as possible is advised. Please contact LAU directly for application packs and information about funding: 0113 295 1330

National & Regional Developments:

The Leeds Dual Diagnosis Project was presented as a case study at the National Dual Diagnosis Conference in Portland Place, London, September 2008.

Dual Diagnosis work developed in Leeds and Humber will be discussed at the Regional Yorkshire & Humberside DD meeting at the University of York in December 2008.

Advances in Dual Diagnosis:

The first edition of the National ADD Journal was published by Pavilion in August 2008. Members of the Leeds DD Practitioners Network have access to a multi-user subscription. To request further information send an e-mail to the address at the bottom of this newsletter.

University of Leeds: Dual Diagnosis Evaluation

In September 2008, The University of Leeds began work on a report entitled 'barriers and facilitators to effective working – The Leeds model'. This work has been commissioned by NHS Leeds who will receive the final report in March 2009. The report will provide valuable information for the development of the city-wide network. The lead researcher, Carolyn Montaña, will by now have had the opportunity to discuss the process of the evaluation with all agency managers and/or dual diagnosis practitioners. Service users have also been involved in the steering of the research project. There are 3 main phases including (i) interviewing a sample of service users in order to discuss their experiences of communication across the network (ii) asking staff within all agencies to complete a provider confidence questionnaire (iii) understand the nature of communication across agencies through process mapping and care pathways information. If you would like further information on this work, please contact 0113 343 1964.

[Carolyn Montaña, University of Leeds](#)

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Case Examples of Partnership Work

Touchstone Community Support Team and St. Anne's Drugs Project have piloted a 'job swap' initiative during 6 weeks between September - October 2008. The aims were to (1) gain insight into each other's work and (2) as a practical way of enabling joint outreach work to support people with co-existing drugs & mental health problems.

"The project proved to be a great success. We found the chance to shadow workers from the other team helpful in terms of experiencing a different way of working and this in turn challenged any preconceptions we had. The good relationships created with members of the St Anne's team makes it easier to understand and to access that service in the future. As well as being an enjoyable piece of work it is the service users who will benefit from the increased potential to have their needs met. The shadowing model we created is one that could be repeated again in the future, with St Anne's and or other organisations" – [Stephen Green, Touchstone](#).

"The recent 6 week joint working pilot scheme has laid firm foundations for future joint working. The scheme enabled the current team of community drugs workers and mental health support workers to combine their joint expertise for the empowerment of those clients living with a dual diagnosis. We continue to benefit from our own unique approaches, dispelling myths and stereotypes and empowering and enabling clients to make informed choices throughout each stage of their own particular journey" –

[Karen Buckland, St. Anne's Drugs Project](#).

Don Cantrell from BARCA Harm Reduction Team and Charlie Place from Assertive Outreach Team –both lead DD practitioners– have developed joint outreach work focusing on people with severe mental health problems and patterns of injecting substance use. This pro-active model of collaboration and engagement has been piloted since June '08 and further reinforced by a collaborative training session at St. Mary's Hospital in September '08. A partnership meeting in November '08 between managers of the above 2 services and the Street Outreach Team was held to formalise and further develop partnership work. A joint working protocol is currently being developed by these services.

Adult Social Care - Mental Health Housing Support Team: DD Survey

Social Services – Mental Health Housing Support Team carried out a Dual Diagnosis survey between August – September 2008. Some of the findings are described below:

Following is a breakdown of statistics relating to only dual diagnosis clients:

Gender

Female	16 – 33.3%
Male	32 – 66.7%

Age

16/17	0 – 0
18-24	3 – 6.3%
25-34	13 – 27.1%
35-44	21 – 43.8%
45-54	6 – 12.5%
55-64	3 – 6.3%
65+	2 – 4.2%

Alcohol/Drugs

Significant alcohol/drug use 32 – 66.7%

Main substance used

Cannabis	9 – 18.8%
Alcohol	27 – 56.36%
Heroin	5 – 10.4%
Amphetamines	3 – 6.3%
Polydrug use	7 – 14.6%
Cocaine/crack	2 – 4.2%
Intravenous	1 – 2.1%

Mental health

Schizophrenia	12 – 25.0%
Depression	22 – 45.8%
Bipolar	5 – 10.4%
Anxiety	6 – 12.5%
Schizoaffective	1 – 2.1%
PTSD	0 – 0
Personality disorder	6 – 12.5%
Other	4 – 6.3%
Depressive disorder with psychotic symptoms	
Korsakov's Syndrome	
Paranoia	

Significant effect on mental health: case worker assessment

Yes	44 – 91.6%
No	4 – 6.3%

Motivation to change: case worker assessment

None	15 – 31.1%
Low	10 – 20.8%
Medium	9 – 18.8%
High	11 – 22.9%

Number of dual diagnosis clients in contact with drug/alcohol services

20 – 41.7%

Commentary

The survey presents some interesting themes especially when compared with the Assertive Outreach Team (AOT) survey detailed in the July 2008 Newsletter, i.e. similar statistics relating to gender breakdown, also an increasing trend of alcohol use and low numbers of intravenous drug users. Finally whilst the MHHST team does have some overlap of service users with AOT, the fact that there is a higher percentage of service users linked with drug/alcohol services from the MHHST may reflect the differing remits of the services. I am sure there are other themes which can be drawn out. One thing that both surveys do indicate is that there is an 'inter-relationship' between substance use and mental health, as to which came first that is an 'age old question'.....

Jo Smith, Mental Health Housing Support Team.

DD Network News & Views

Do you have any news or comments that you would like to share with Dual Diagnosis Network members, partner services and service users in Leeds?

If so, please send a brief article to the e-mail at the bottom of the page. Proposed articles should have a maximum word count of 300 words.

