

Bromley Drug and Alcohol Services - views and experiences of users

**Healthwatch Bromley
Autumn – Winter 2025**



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About Healthwatch

Healthwatch Bromley (HWB) is the statutory, independent consumer champion for health and social care service users in Bromley, set up by the Health and Care Act 2012. We aim to put people at the heart of care. We ask what users like about services, and what could be improved, and share their views with those with the power to make change happen.

Our purpose is to help make care better for people by:

- Providing information and advice to the public about accessing health and social care services and choices in relation to those services.
- Obtaining the views of residents about their need for, and experience of, local health and social care services and making these known to those who commission, scrutinise and provide services.
- Reporting the views and experiences of residents to Healthwatch England (HWE), helping it to perform its role as national champion.
- Making recommendations to HWE, to advise the Care Quality Commission (CQC) to carry out special reviews of or investigations into areas of concern.

YVHSC

Your Voice in Health and Social Care (YVHSC) is an independent organisation which gives people a voice to improve and shape services and help them get the best out of health and social care provision. YVHSC holds the contract for Healthwatch Bromley (HWB). HWB staff members and volunteers speak to local people about their experiences of health and social care services. Healthwatch engages and involves members of the public in the commissioning of health and social care services, through extensive community engagement and continuous consultation with local people, health services and the local authority.

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Disclaimer

The information presented within this report describes the views and experiences of service users, families and professionals to whom we spoke as part of our substance misuse project. The findings provide a snapshot of experiences and key insights from these individuals. The report cannot cover the totality of experiences but can be used to guide service improvements and identify further research required.

How to read this report

The report starts with an Introduction, followed by Project Background, Aims and Methodology.

Key Findings and Recommendations can be found on pages 12 – 13 and 14 – 16 respectively.

Four case studies can be found on pages 18 – 22.

The appendices, from page 23, include:

- Data and charts covering survey responses
- Survey templates
- Marketing materials

Introduction

Healthwatch Bromley exists to help local people get the best out of their health and social care services, articulating their voices to help improve and shape services now, and for the future.

Substance misuse continues to pose a significant public health challenge across the UK, contributing to poor health outcomes, increased hospital admissions, and wider social and economic costs. In the London Borough of Bromley (LBB), although recorded prevalence of substance misuse is lower than national and regional averages, specific trends and population-level data highlight emerging concerns that warrant closer examination and targeted intervention.

The Department of Health and Social Care (DHSC) and the UK Health Security Agency have produced prevalence estimates of people using opiates and/or crack in England for 2022 to 2023. DHSC data illustrates Bromley currently has the second lowest opiate and crack use (OCU) rate for 15 to 24-year-olds in South East London (1).

Drug and alcohol services in LBB are primarily commissioned by the local authority and delivered by Change Grow Live (CGL), a national provider specialising in substance misuse support. The Bromley Drug and Alcohol Service offers a comprehensive suite of interventions, including harm reduction support, one-to-one key working, prescribing services, and needle exchange facilities (2).

Additionally, the Bromley Changes service—also operated by CGL—provides targeted support to young people under 18 misusing substances or affected by another person's substance use (3). Despite the effectiveness of these services, engagement is often shaped by complex personal and social circumstances. People face challenges in their everyday lives related to stigma associated with drug and alcohol use, alongside difficulties navigating systems that can feel disjointed or overwhelming.

Stakeholder engagement highlights that experiences of trauma, homelessness, or involvement with the criminal justice system can significantly affect individuals' capacity to trust and engage with services, presenting additional barriers to sustained access and participation. It is important to note that these findings and the issues highlighted in the Substance Misuse Needs Assessment 2021/2022 are being addressed – there have been substantial service developments since the report was published (4).

Following the publication of the national drug strategy *From Harm to Hope* (2022), every local area was required to establish a strategic partnership to address drug and alcohol-related harms. In response, Public Health Bromley established the Combating Drugs and Alcohol Partnership (CDAP), a multi-agency partnership bringing together key stakeholders across health, social care, criminal justice, housing, and the voluntary sector to coordinate a system-wide approach to prevention, treatment and recovery (5).

Project Background

Healthwatch Bromley examined the current, local landscape of substance misuse services, and the experiences and views of service users, as well as those of their families/carers and healthcare professionals.

The project collected evidence and insights about personal experiences of accessing drug and alcohol support, the impact of services on users' health and wellbeing, potential barriers to accessing services and areas for improvement within the current system.

Aligned with the objectives of Bromley's Combatting Drugs and Alcohol Partnership (CDAP), we engaged with service users, families/carers, and professionals directly through surveys and focus groups.

Through this initiative, Healthwatch Bromley hopes to improve access and support for families, carers and service users of drug and alcohol services by producing practical recommendations, based on feedback gathered.

Aims and Methodology

Aims

The project's aims were to:

- Generate a report detailing Bromley service users', families', carers and professionals' experience of accessing substance misuse services
- Identify any barriers or challenges service users, families, carers and professionals face in achieving and maintaining positive health and well-being
- Make evidence-based recommendations to policymakers and healthcare partners aimed at improving substance misuse services for service users, families and carers in Bromley
- Identify any possible knowledge gaps and areas for future research.

Methodology

To gather comprehensive insights into the experiences of substance users, their families, and professionals and the individuals they care for, we employed both qualitative and quantitative research methods. These included a survey available in both digital and paper formats to enable accessibility for a wide range of participants. The digital version was promoted via our website and social media platforms, while a poster with a QR code was used to direct individuals to the survey.

We provided self-addressed freepost envelopes to support respondents who preferred the paper version, enabling a smooth process for submitting responses.

Hard copy versions were sent to local partners for distribution, to extend the reach of the survey. Additionally, voluntary sector organisations played a key role in promoting the research, sharing the survey through their websites, newsletters, and other communication channels.

We carried out engagements at the Change Grow Live service on Farwig Lane on:

- September 26th and 29th
- October 2nd, 8th, 10th, 26th and 29th
- November 6th, 7th, 20th and 21st

Participants

We heard from 43 people about their experiences; 28 were service users, 13 health professionals and two were friends and family of service users.

Of the 28 service users:

- 54% identified as female, 45% as male (Appendix 10)
- 29% were aged between 45 – 54 years, only 4% between 75–84 (Appendix 11)
- Most (82%), were White English/ Welsh/ Scottish/ Northern Irish/ British (Appendix 12)
- 40% were in paid employment, 25% not in employment/ not actively seeking worked – retired (Appendix 12)
- 29% considered themselves to have a long-term health condition (Appendix 11) and 7% were disabled (Appendix 13)
- More respondents live in Bromley Town than any other ward.

Equalities Analysis

During outreach and engagement visits, we collected demographic data from people who gave consent.

During our examination of survey responses, we analysed feedback from different demographic groups, on their experiences of community mental health services. We did not find any discernible variations in experiences based on factors such as gender, age, or ethnicity.

Change Grow Live (CGL)

Change Grow Live (CGL) is a national charity that provides a broad range of support services for individuals affected by substance misuse, alcohol dependency, and other complex life challenges. Their work focuses on empowering people to make positive and sustainable changes through a person-centred approach.

The organisation offers one-to-one key working, counselling, and recovery coordination, alongside medically assisted treatment, detox options, and harm-reduction services such as needle exchange programmes and blood-borne virus testing. They also provide group programmes, peer support, and employment assistance through their Individual Placement and Support (IPS) service for those in recovery.

In addition, CGL delivers tailored support for young people and families, offers guidance for individuals involved in the criminal justice system, and connects people to wider community resources, including housing, training, and benefits advice. Through this comprehensive support, the charity aims to promote recovery, wellbeing, and social reintegration, helping people to lead healthier and more fulfilling lives.

Self-Care Event

Monday 17th November 2025

Healthwatch Bromley hosted a relaxing Self-Care "Sip n Paint" morning at the CGL Clean Slate Project. Eight service users joined in to paint ceramic coasters and pots while enjoying tea, coffee and cake. The session offered a wonderful opportunity for creativity, conversation and calm, and was very much enjoyed by everyone who attended.





"I had a really great time connecting with service users throughout the self-care event at CGL. One service user mentioned how art was one of their favourite ways to navigate the complexity of addiction. It was a really calming and meditative outlet, and it allowed them to focus their attention on creating something positive. Seeing everyone being so willing to participate was a really fulfilling experience. Having a sense of community and belonging is essential to dealing with addiction recovery, and the service users seemed to really benefit from having others to hold them accountable."

Healthwatch Bromley Intern



"I'm incredibly proud of the difference our teams are making every day in supporting people to make meaningful and lasting changes. This report highlights the strength of our relationship-based approach, the dedication of our staff, and the impact of our recovery community, while also providing valuable opportunities to continue improving the support we provide."

Annie McGeown, Head of Service CGL Bromley

Key Findings

People accessing drug and alcohol support services often engage with a range of interventions as part of their recovery journey. Their experiences provide valuable insight into what feels most helpful and meaningful in practice. The feedback collected highlights clear themes around the types of services that worked well for them, illustrating the importance of personalised support, peer connection and integrated approaches in promoting stability and ongoing recovery.

Services that work well

Feedback from service users, friends and family, and professionals highlights the importance of personalised, relationship-based support. One to one support was most frequently identified as working well, with users valuing consistent contact, trust and feeling listened to. Group and peer support, including AA and drop-in sessions, are also seen as beneficial in reducing isolation and providing encouragement. Prescribing and detox services are considered most effective when delivered alongside ongoing one to one or group support as part of a wider recovery pathway. Professionals additionally recognised the commitment of staff, strong partnership working and the development of the CGL Clean Slate Project as key strengths within the local system.

Access and accessibility

Access to services was reported positively, with 50% of service users saying accessing support is 'Very easy' and 46% saying 'Fairly easy'. Clear referral pathways, effective signposting and a welcoming first contact were important in supporting access. A small percentage (4%) faced challenges, related to waiting times and a lack of awareness of available services. Based on the feedback we received, related to waiting times, it is unclear which particular areas service users struggled to access with and a further investigation would be beneficial to identify any gaps. CGL informed our team that the service responds to all referrals within 24–48 hours.

Effectiveness and outcomes

Support was widely viewed as effective, with 96% of service users reporting a positive impact. Feedback included examples of sustained sobriety, improved wellbeing and life changing outcomes. While some individuals described relapse as part of their recovery journey, the overall experience reflected increased stability, confidence and hope.

Key Findings

Coordination and integration

Views on coordination across primary, secondary and social care were mixed. While partnership working between substance misuse services, mental health, social care and criminal justice agencies was acknowledged, gaps in communication and information sharing were identified. Coordination was described as improving but still developing, with clearer communication seen as important to strengthening integrated care.

Barriers and inequalities

Although most service users did not report significant barriers, some experienced long waiting times, difficulty accessing aftercare or challenges linked to mental health needs. Professionals identified people experiencing homelessness (24%), those with a disability or long-term condition (24%), individuals with a Co-occurring Mental Health and/or Drug (COMHAD) need (17%) and ethnic minority communities (7%) as groups more likely to face additional access challenges. Overall, people with complex and overlapping needs were recognised as being at greater risk of encountering barriers.

Workforce and service culture

Across the findings, the role of staff and overall service culture emerged as a significant strength. Service users frequently described feeling respected, listened to and supported without judgement. Professionals also recognised the resilience, commitment and hands on approach of frontline staff. This consistent emphasis on compassionate, person-centred practice suggests that the way support is delivered is as important as the type of service provided, contributing to positive experiences and improved outcomes.

Recovery environment

The findings suggest that the overall recovery environment plays an important role in supporting positive outcomes. Service users described welcoming, friendly settings where they felt safe and understood. The development of the Clean Slate Project and access to group spaces have contributed to a sense of belonging and shared purpose. This highlights the importance of creating spaces that reduce isolation and promote connection alongside structured treatment.

Recommendations

The findings highlight strong foundations within local drug and alcohol services, particularly in personalised support and positive recovery outcomes. However, they also identify opportunities to strengthen coordination, reduce inequalities and improve continuity of care for individuals with complex needs. The following recommendations are intended to support strategic development across the system, building on what is working well while addressing identified gaps to improve long term recovery outcomes for residents in Bromley.

Recommendations for Public Health as the commissioners for substance use support

1. Strengthen cross sector coordination

- Establish formalised and consistent cross sector communication pathways between primary care, mental health, probation and substance misuse services across the borough.
- Embed structured multi agency review arrangements for individuals with complex and overlapping health and social care needs.

2. Improve information sharing systems

- Implement clear information sharing protocols between primary care, mental health, housing providers and substance misuse services across the borough.
- Develop Co-ordination across all services to improve communication and avoid key information being duplicated or missed through secure and consent-based systems.

3. Prioritise individuals with complex and overlapping needs

- Align commissioning and service planning with the needs of people experiencing homelessness, COMHAD and long-term physical and mental health conditions.
- commission targeted services to reduce barriers faced by specific groups and people with protected characteristics, people experiencing homelessness, young people, and people with combined mental health and substance use needs (Appendix 23) .

4. Strengthen housing and recovery pathways

- Align housing support provision with recovery planning and relapse prevention frameworks.

Recommendations

5. Maintain sustainable investment in personalised provision

- Prioritise sustained funding for relationship based, one to one support models within commissioned drug and alcohol services.
- Sustain investment in the service based, community facing and peer led recovery environments.

6. Embed equity and prevention in strategic planning

- Use local population health data and lived experience insight to inform targeted outreach and early intervention strategies.
- Monitor inequalities in access, engagement and outcomes across commissioned services and partnership provision.

Recommendations

Recommendations for CGL Bromley as the provider of community substance use support

1. Consolidate relationship-based support

- Maintain continuity of key workers throughout treatment and recovery journeys wherever operationally possible.
- Deliver flexible and responsive personalised care plans reflecting changing clinical, social and housing circumstances.

2. Strengthen peer and recovery community provision

- Expand structured group work programmes and peer support networks alongside clinical treatment.
- Promote inclusive recovery spaces that support sustained engagement and community connections.

3. Enhance communication and referral feedback

- Establish consistent feedback mechanisms with primary care, mental health and referring partners.
- Improve clarity and timeliness of communication regarding prescribing, engagement status and discharge planning.

4. Review aftercare and transition pathways

- Embed structured follow up arrangements following detoxification and completion of structured programmes.
- Develop clearly defined aftercare pathways linking individuals with ongoing community and peer based recovery support.

5. Expand outreach and awareness

- Deliver targeted outreach and accessible satellite provision for individuals less able to engage with centralised services.
- Improve awareness and clarity of referral pathways across the borough among residents, families and partner organisations through primary care networks (PCN) and local authority communication channels (Newsletters, Magazines, etc).

6. Support workforce development and resilience

- Invest in ongoing staff training, supervision and reflective practice frameworks.
- Promote workforce wellbeing, retention and service stability strategies.

Acknowledgements

Healthwatch Bromley would like to thank all the local people who shared their feedback, and our committee, interns, work placement students and volunteers for their contributions and on-going support. We would also like to thank the following local partners:

- Alcohol Support Group
- Anerley Team Ministry Foodbank
- Bromley Borough Food Bank (Trussel Trust)
- Bromley Christian Centre (BCC) Foodbank
- Bromley's Combatting Drugs and Alcohol (CDAP) working group
- Bromley GP Alliance
- Bromley Healthcare (BHC)
- Bromley Homeless Team
- Bromley Living Streets
- Bromley Well
- Carers Trust
- Change Grow Live (CGL)
- Clarion Housing
- Community Links Bromley
- King's College Hospital NHS Foundation Trust (KCH)
- NHS South East London Integrated Care Board (SEL ICB)
- London Borough of Bromley
- South East London Mind (SEL Mind)
- South London and Maudsley NHS Foundation Trust (SLaM)
- The Metropolitan Police

Case Studies



Case Studies

During our engagement visits, we asked service users, professionals and family members for more detailed responses about their experience. We had five individuals willing to share their experience in depth, and have developed their feedback into anonymous case studies, with their consent. The first is as written by a service user.

Case study 1:

This case study highlights how managing long-term health conditions can lead to dependency on prescribed medication when pain and lack of emotional wellbeing are not fully addressed. The individual's reliance on prescription painkillers began to affect their health, daily life and relationships, eventually resulting in hospital admission.

Referral to CGL provided a key turning point, with access to counselling, one to one support and group sessions. Through consistent, non-judgemental support, they have been able to safely reduce their dependency and develop healthier coping strategies. While recovery is ongoing, the case demonstrates increased control, renewed hope and the value of holistic support during difficult periods.



"I have been living with several long-term health conditions that required ongoing medication. Over time, reliance on prescription pain killers to manage my symptoms turned to dependency. I found myself taking more than I needed.

My dependency affected my health and daily life. I became socially withdrawn and my relationship broke down. I ended up being admitted to hospital. They referred me to CGL.

Though the referral I was able to access treatment plans (counselling, one to one support, group sessions, etc). With guidance from the service, I began to safely reduce my dependency and develop new coping strategies for managing my pain and emotional wellbeing.

I am still on the road to recovery, but I am now in control of my health, and I feel there is hope for the future. CGL has been there for me during my darkest hours. Would I be here without them? I doubt it."

Case study 2:

This case study shows how the isolation of the COVID – 19 pandemic, combined with work related pressure, increased reliance on alcohol as a coping mechanism. What started as loneliness and stress gradually became unmanageable, prompting the individual to seek support.

Engagement with CGL provided a structured and supportive response through one-to-one support, counselling and group sessions. These interventions helped the individual explore the underlying causes of their drinking, develop healthier ways to manage stress and reduce feelings of isolation by connecting with others. The case highlights the positive impact of accessible, person centred support in achieving sobriety and supporting lasting recovery and wellbeing.



“During COVID I started drinking more because I felt very lonely and isolated. At the same time, the pressure from my job was a lot to deal with and alcohol became a way for me to cope. Over time, my drinking started to get out of control, and I realised I needed help.

Getting support from Change Grow Live really helped me. Having one to one support with a support worker gave me someone I could talk to openly and honestly. Counselling helped me understand why I was drinking and find better ways to deal with stress. The group sessions also helped because I could hear from others who were going through similar experiences, which made me feel less alone.

With this support, I have been able to stay sober and make positive changes in my life. Change Grow Live has helped me take important steps towards recovery and moving forward.”

Case study 3:

This case study highlights the transformative impact of compassionate, person centred support for individuals who may not initially feel that these services are for them. It demonstrates how accessible self referral pathways and even informal awareness can act as important gateways to engagement.

The individual's experience shows the value of being treated with dignity and respect, particularly for those with experience of the criminal justice system, who may expect judgement or stigma. It also underlines the importance of community and peer connection in sustaining recovery, as group sessions and time spent at the CGL service helped reduce isolation, build belonging and strengthen motivation.

Overall, the case illustrates how consistent, non-judgemental support combined with meaningful connection can help break long standing cycles and support lasting positive change.



"From a young age, I was in and out of prison and drugs became my way of coping with everything that was going on in my life. It felt like a cycle I could not break and for a long time I did not think support was for someone like me. One day, I overheard people talking about Change Grow Live on a bus. Something about that conversation stayed with me and I decided to self-refer.

Since coming to CGL, my life has started to change. I have now been clean for almost a year, which is something I am really proud of. From the beginning, the staff have supported me without any judgement. They treated me with respect and made me feel welcome, which made a big difference to my confidence.

By coming to group sessions or just spending time at the Hub, I no longer feel alone. There is always someone to talk to and people who understand what I have been through. Having that support around me has helped me stay focused on my recovery."

Case study 4:

This case study highlights how the emotional pressures of early motherhood can contribute to alcohol use when support is available. Following the birth of her baby, alcohol became a way of coping with overwhelm and anxiety, affecting her confidence and wellbeing. Engagement with Change Grow Live was a turning point. Through consistent, non judgemental one to one support, she has developed healthier coping strategies and rebuilt her confidence. While recovery is ongoing, the case demonstrates renewed stability and the value of compassionate, tailored support.



“After the birth of my baby, I felt overwhelmed and began drinking again as a way of coping. I was ashamed and frightened that I was failing as a mother, which made it even harder to ask for help.

When I reached out to CGL, I was met with kindness and no judgement. My key worker took time to listen and understand both my drinking and the emotional challenges of becoming a new mum. The 1-1 support has been a lifeline, giving me space to talk honestly about my triggers and build healthier ways of coping. Today, I am sober and present for my child. The support I received has helped me rebuild my confidence and believe that I can be the mother my child deserves.”

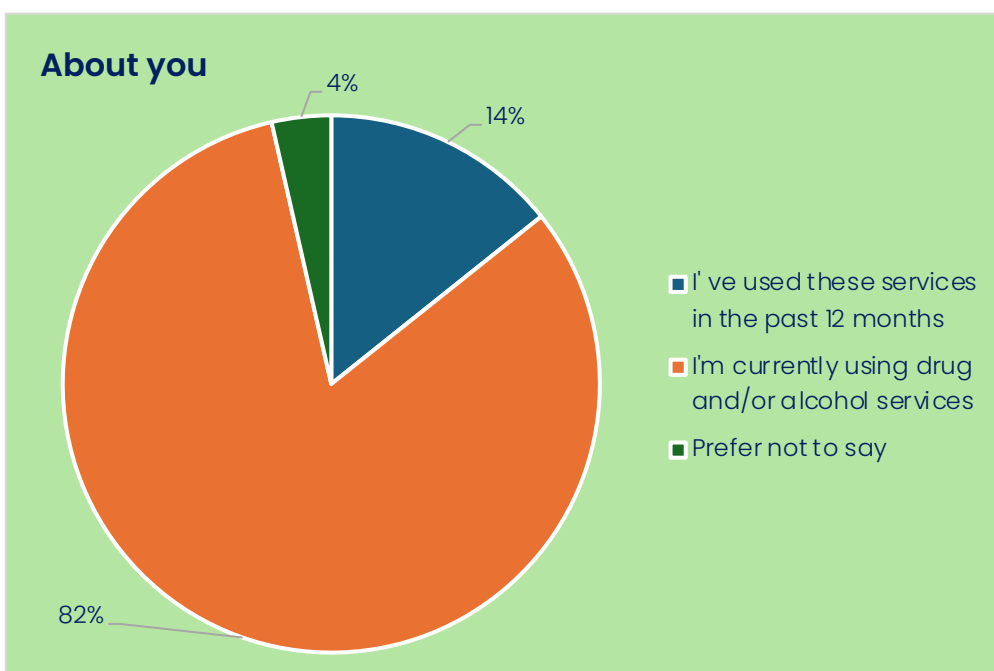
Appendices



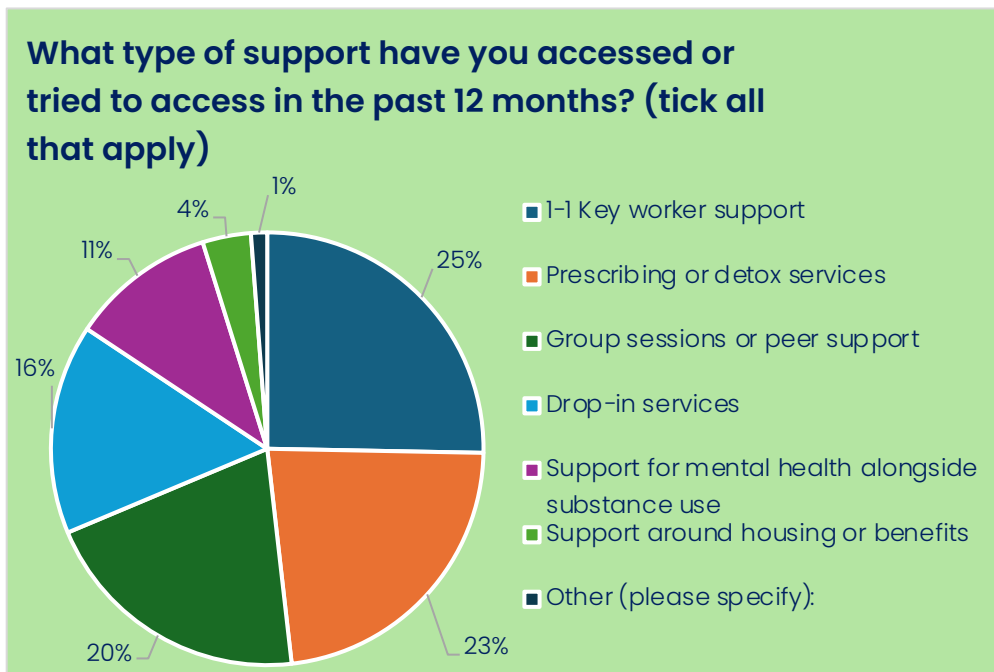
Service User Survey Responses Appendix 1



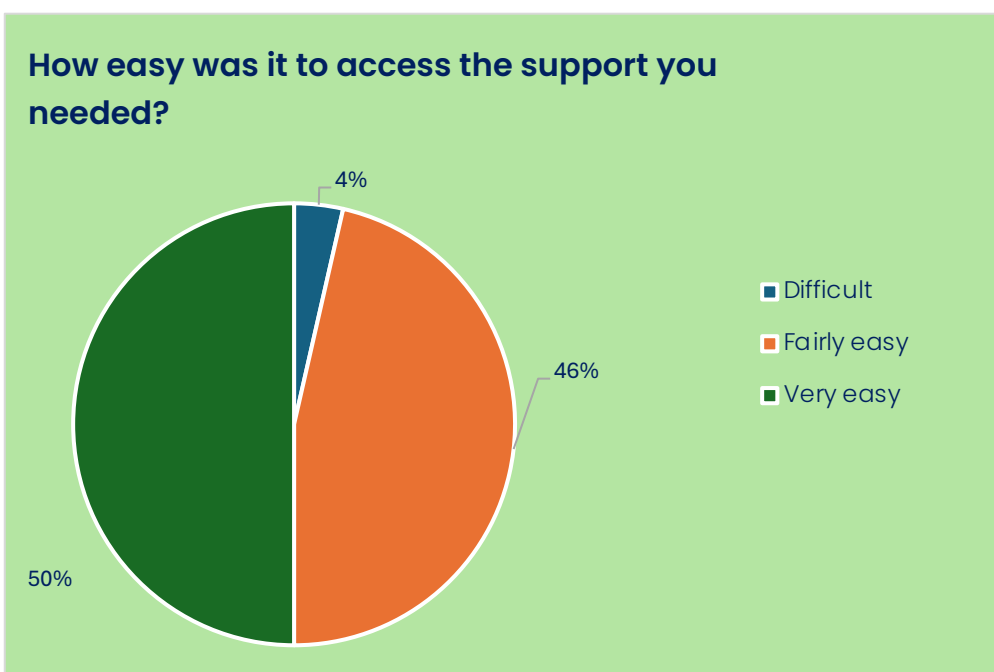
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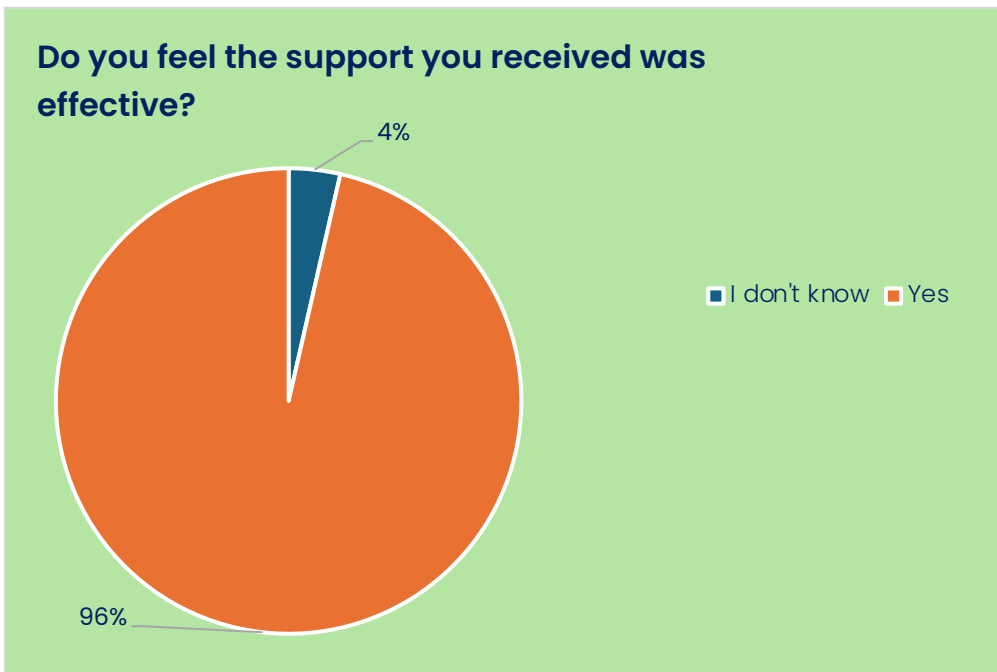
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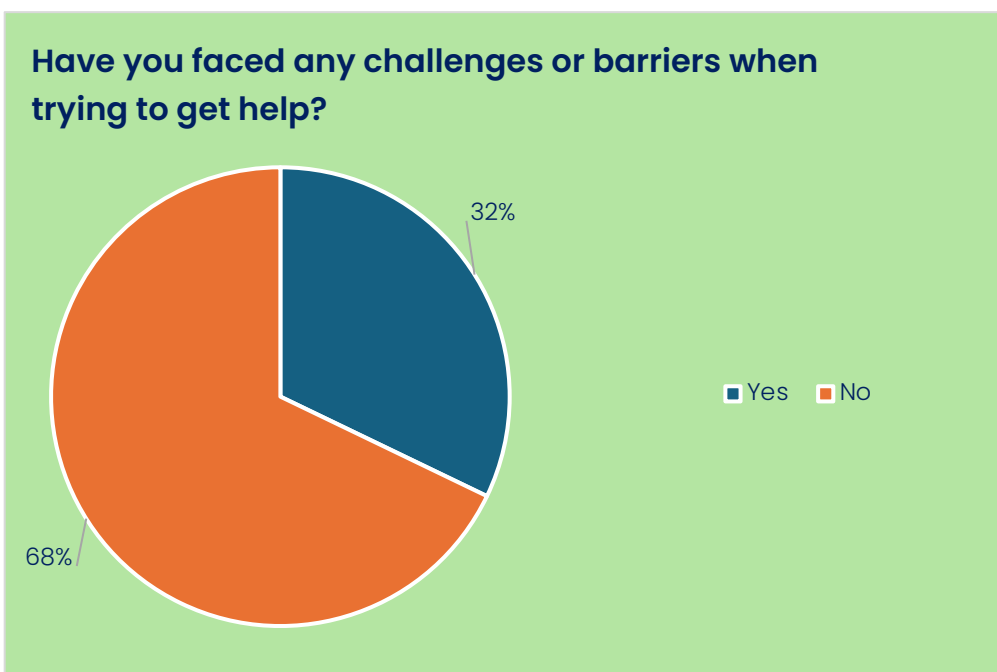
Appendix 4



Appendix 5

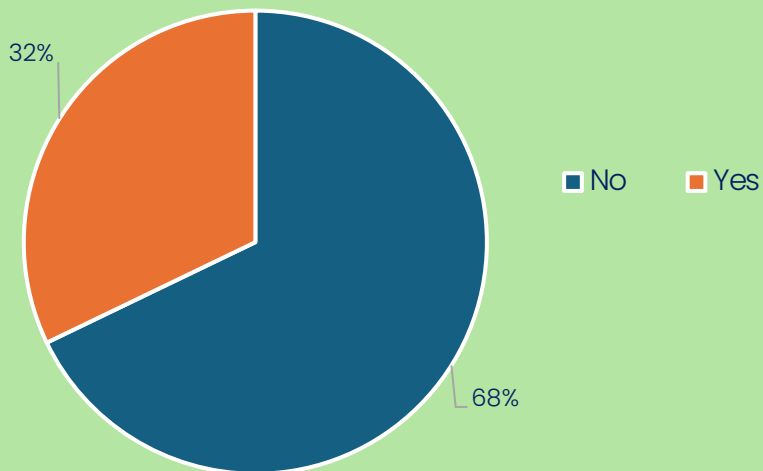


Appendix 6



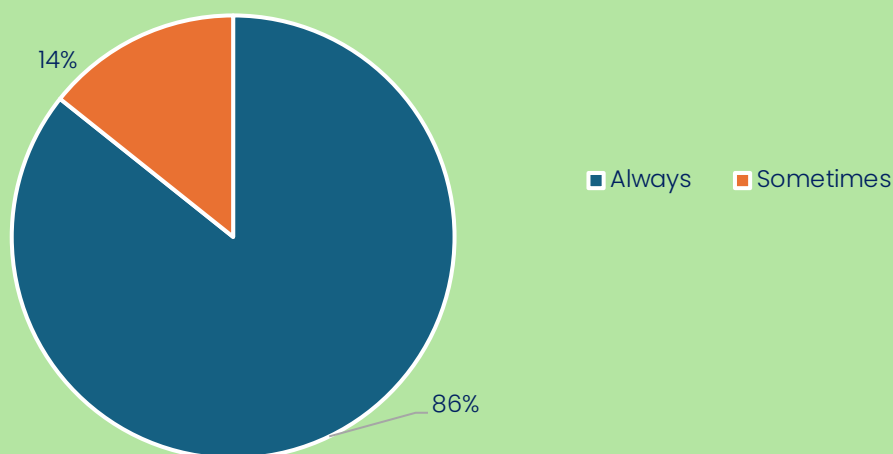
Appendix 7

Have you ever felt that your personal situation made/ makes it harder to get support?

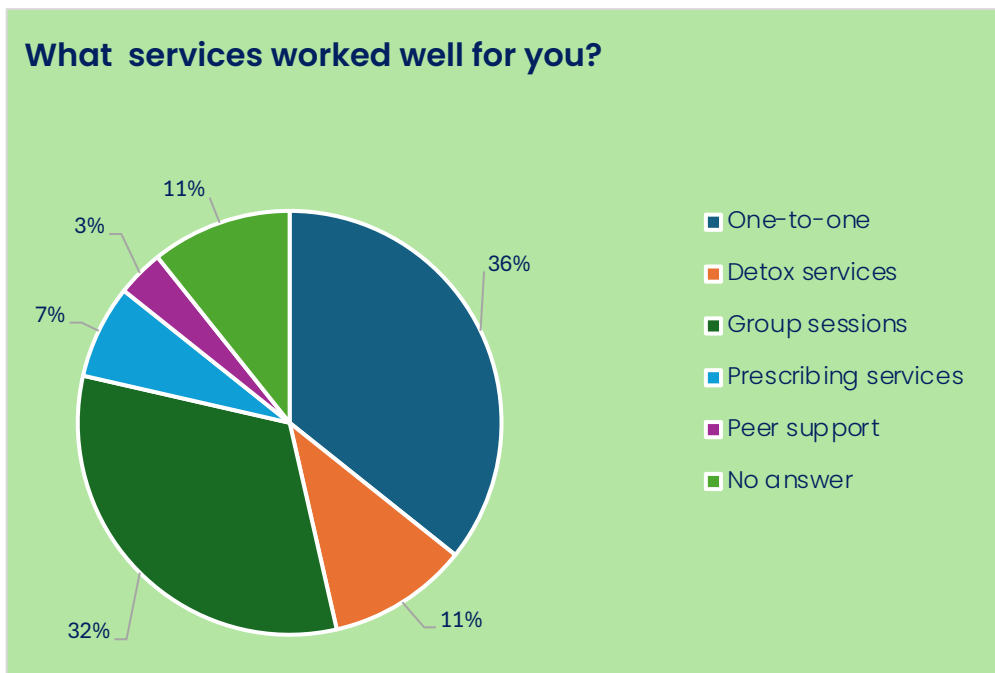


Appendix 8

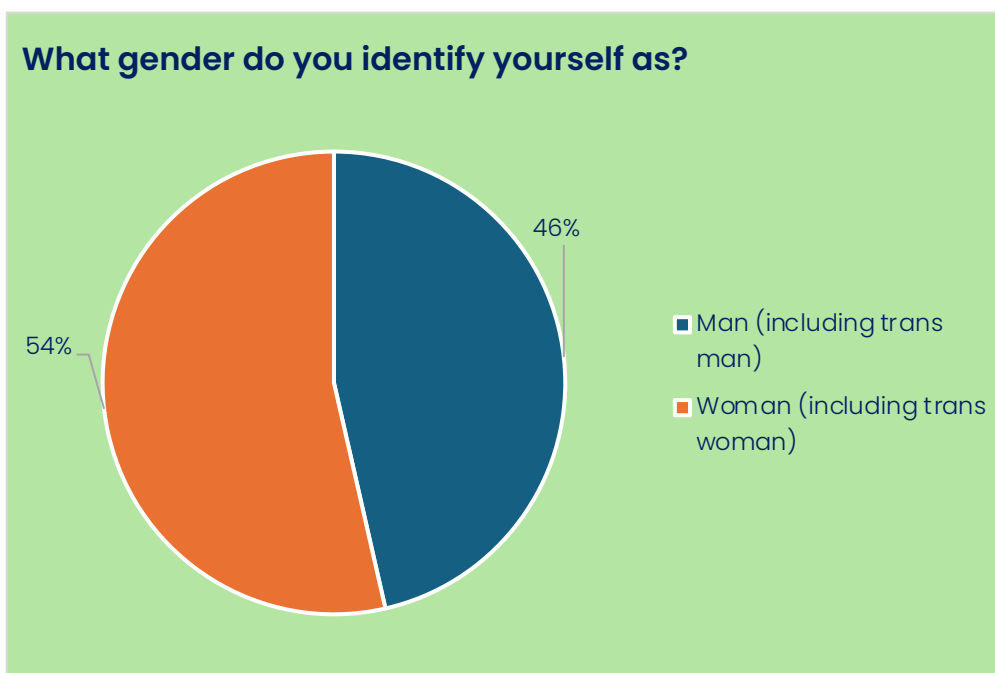
Do you feel involved in decisions about your care and treatment?



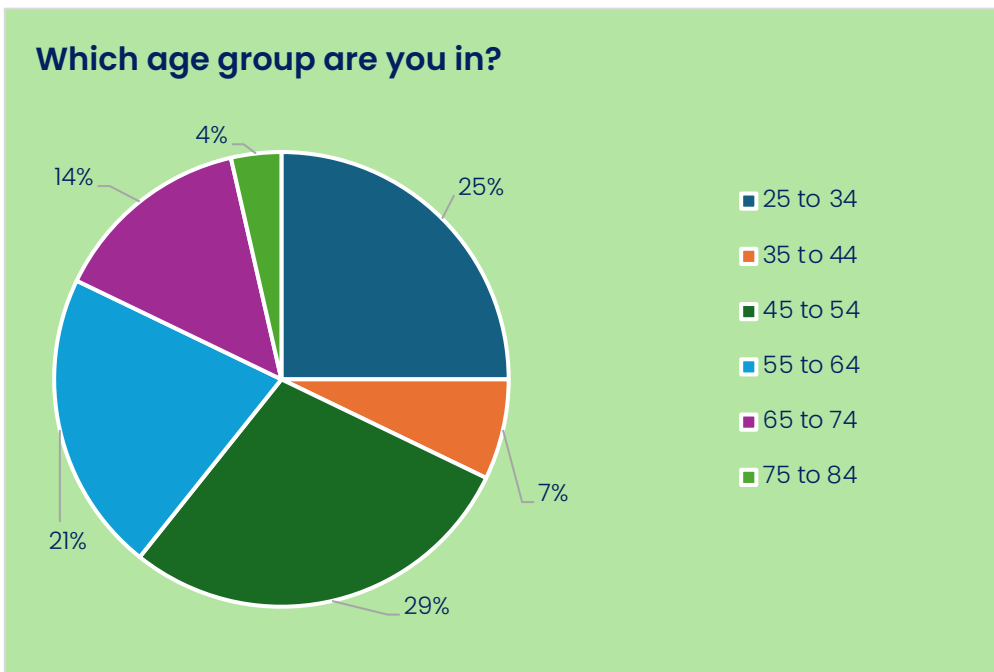
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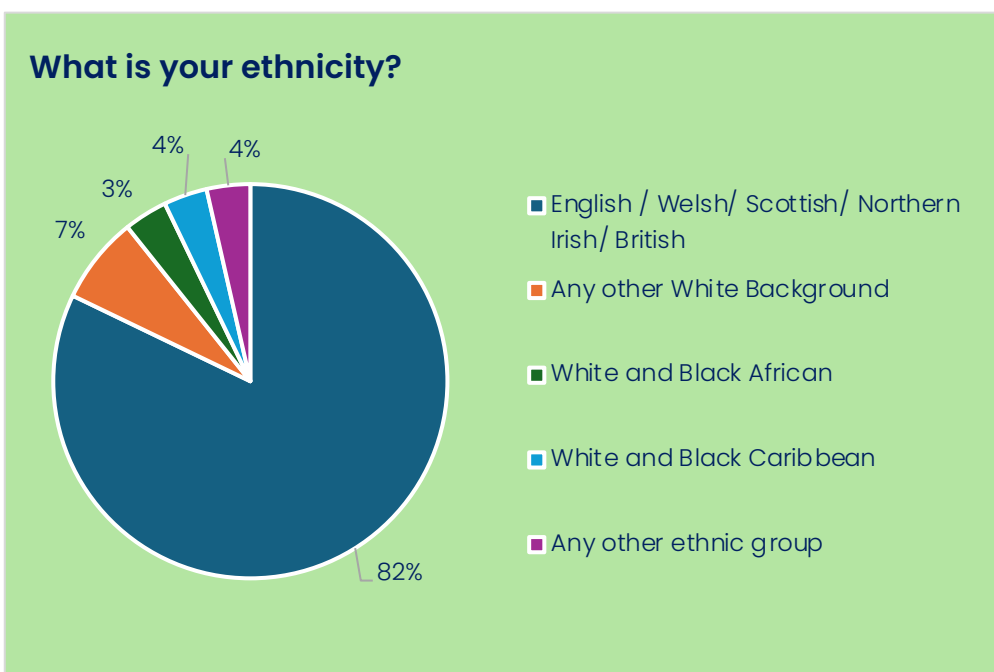
Appendix 10



Appendix 11

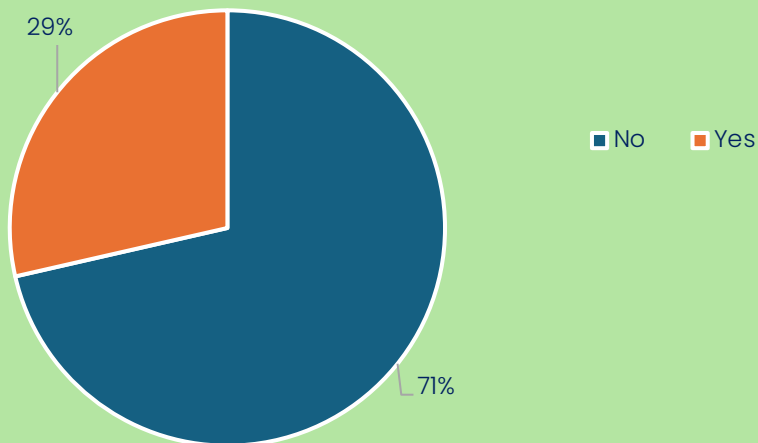


Appendix 12



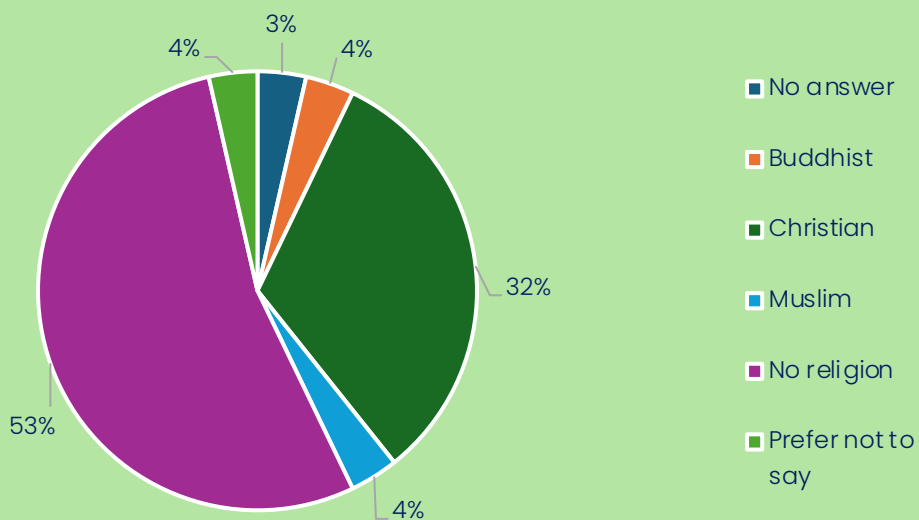
Appendix 13

Do you consider yourself to have a long-term condition or health and social care need?

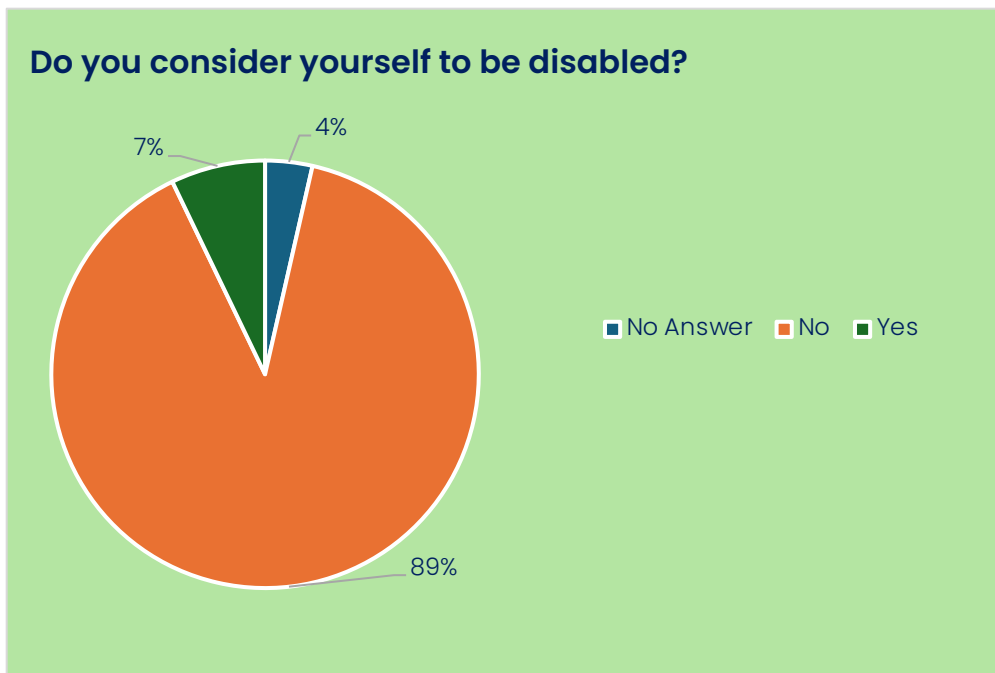


Appendix 14

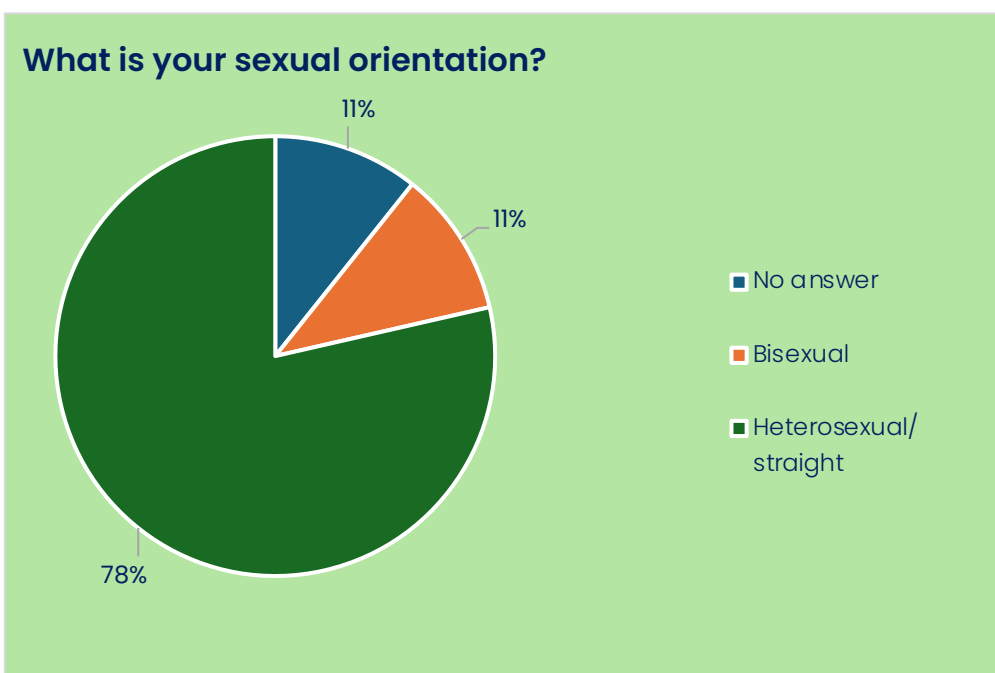
What is your religion?



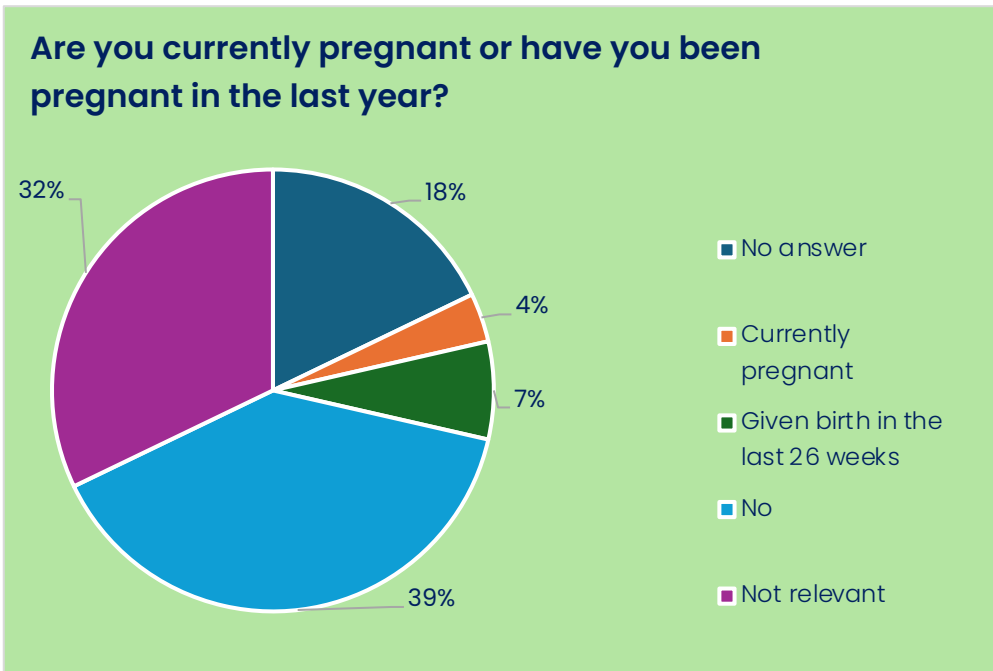
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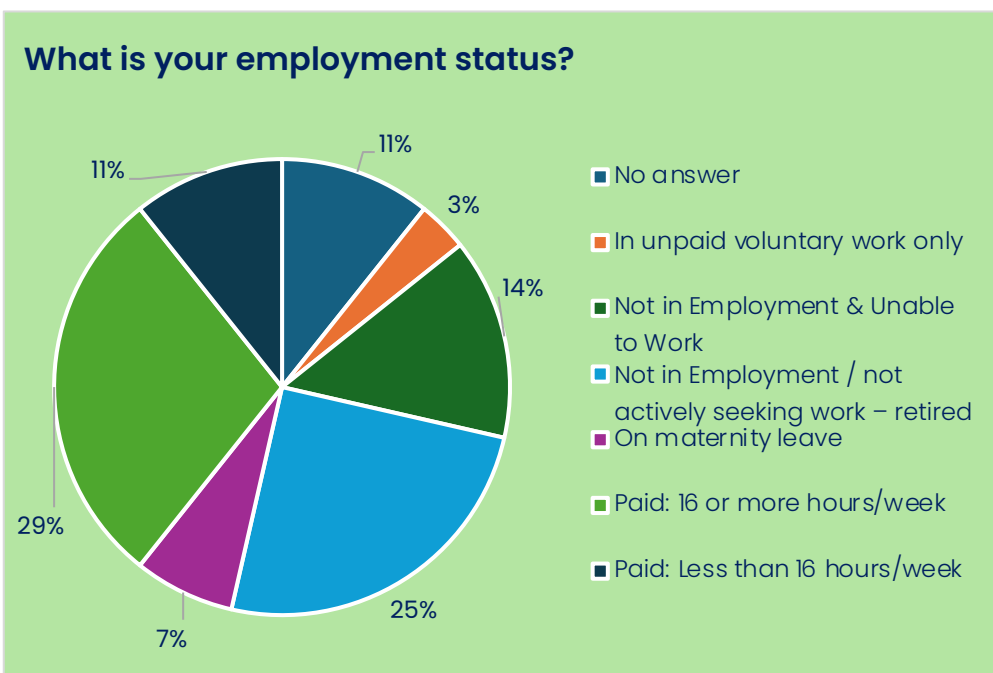
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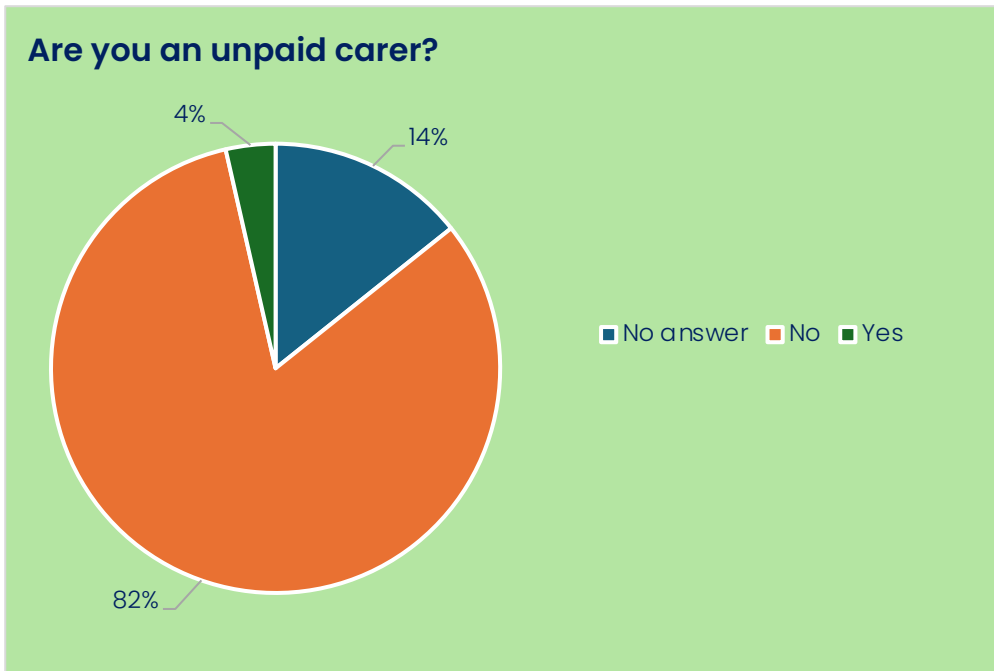
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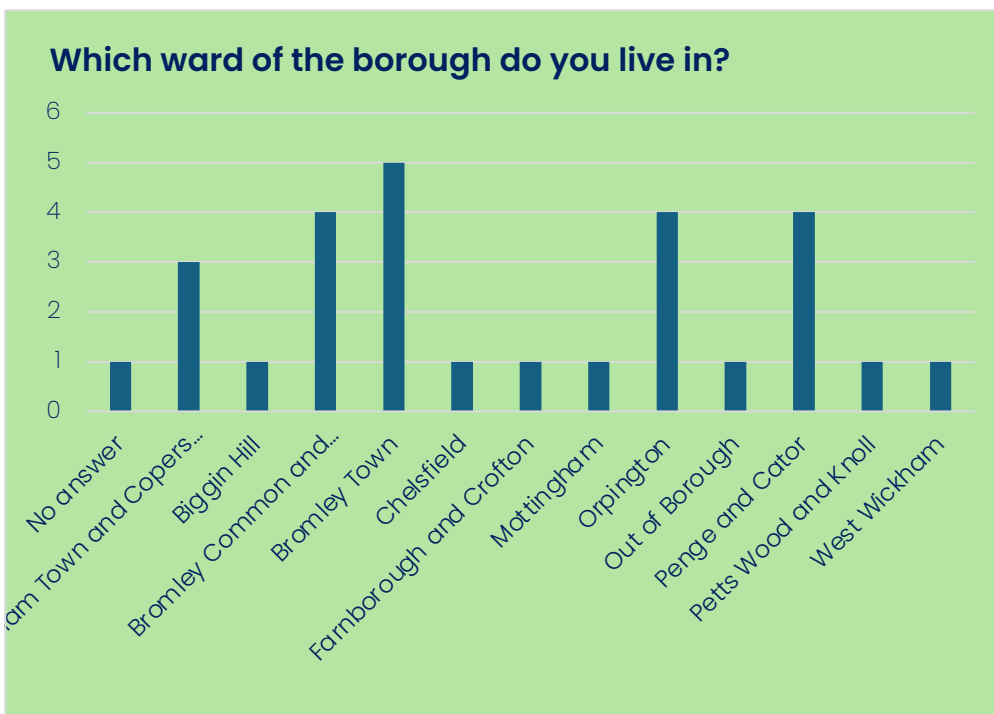
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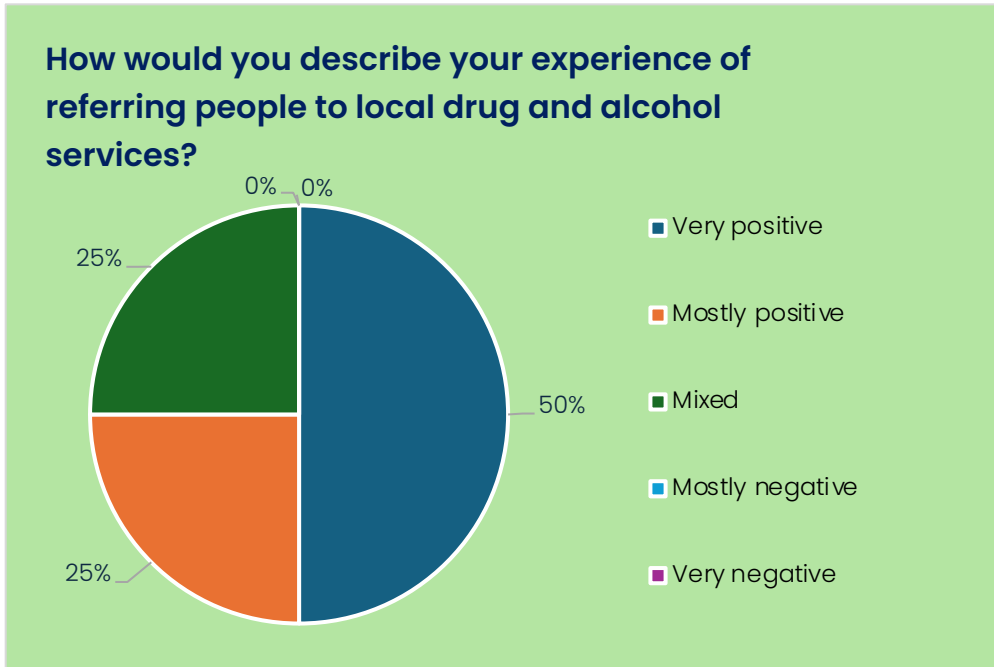
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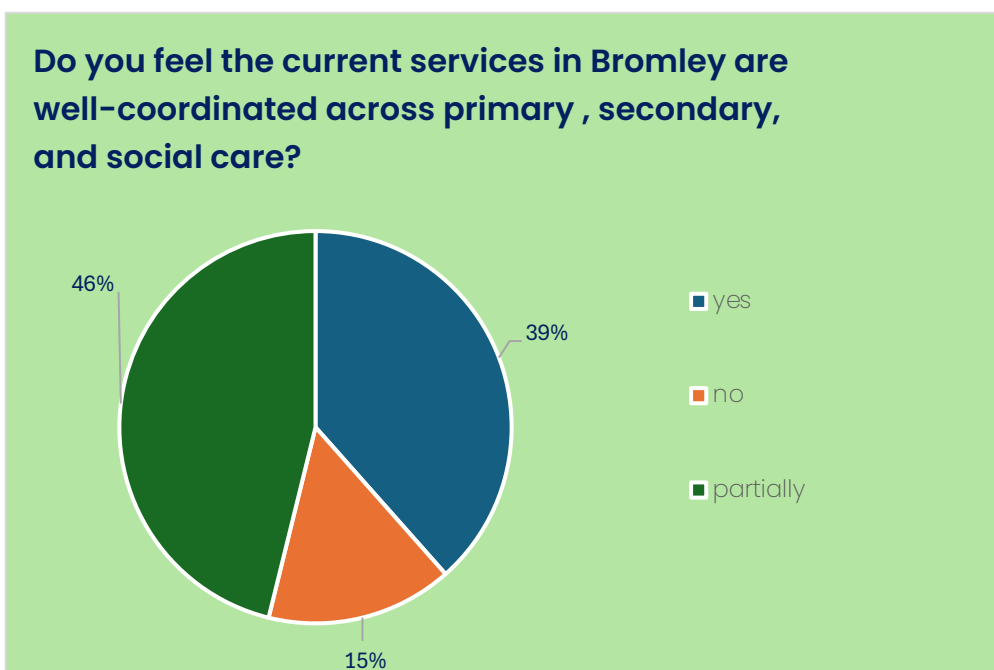
Appendix 20



Professionals Survey Responses Appendix 21

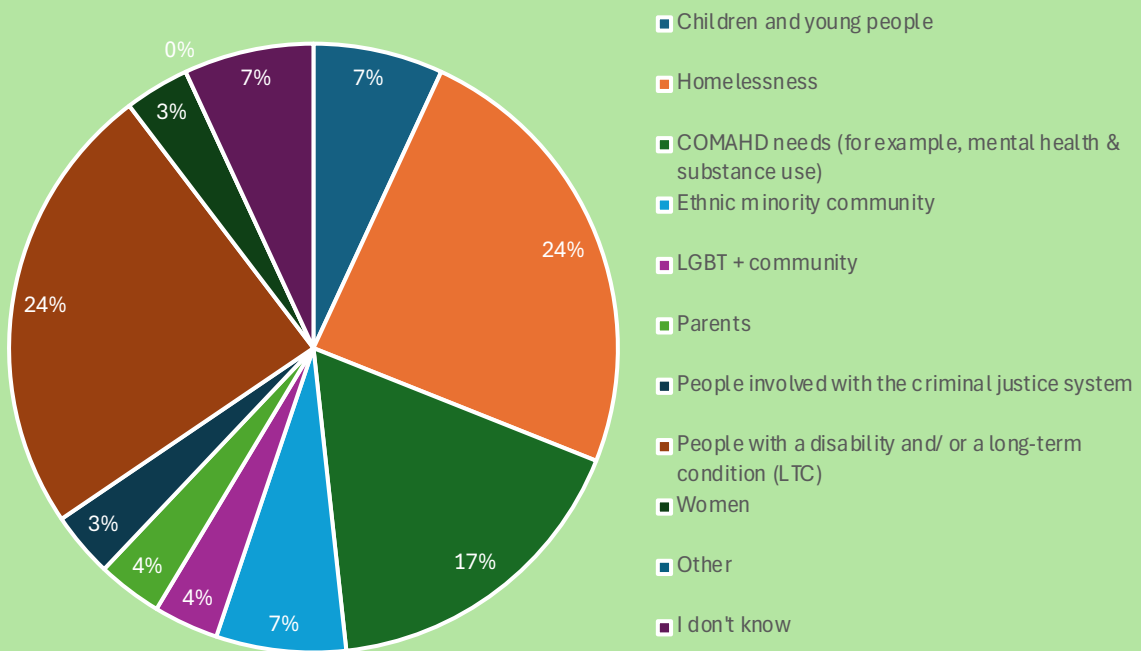


Appendix 22



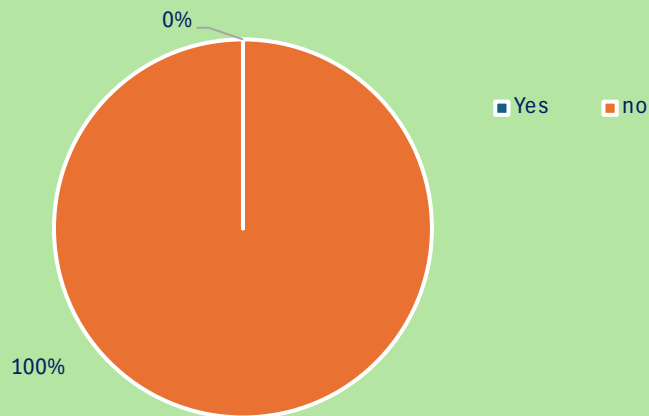
Professionals Survey Responses Appendix 23

Are there specific groups of people you feel face particular access difficulties or additional barriers?



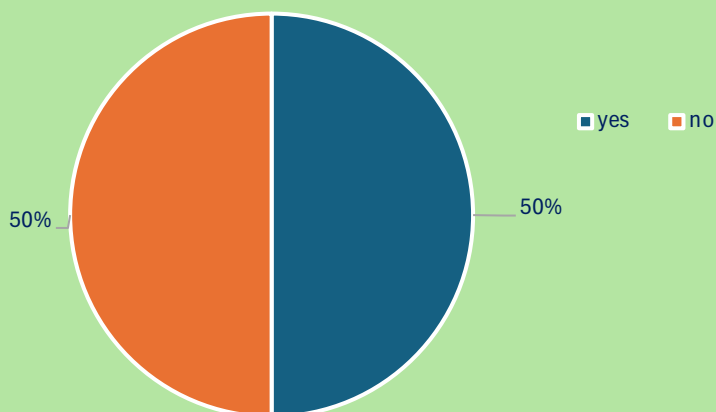
Friends and Family Survey Responses Appendix 24

Is the person you support currently using drug or alcohol services in the London Borough of Bromley?

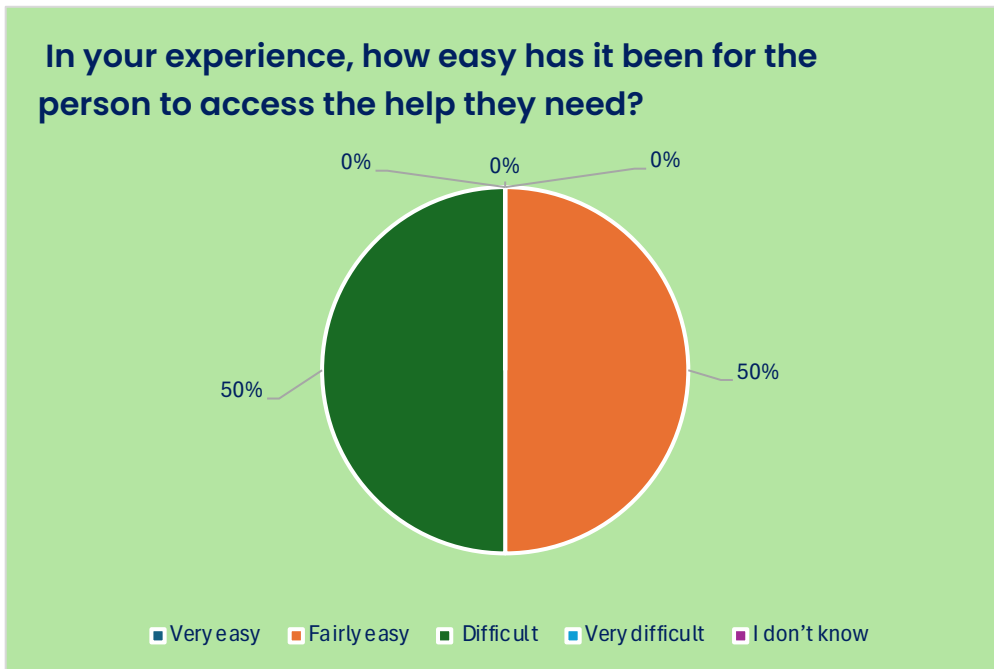


Appendix 25

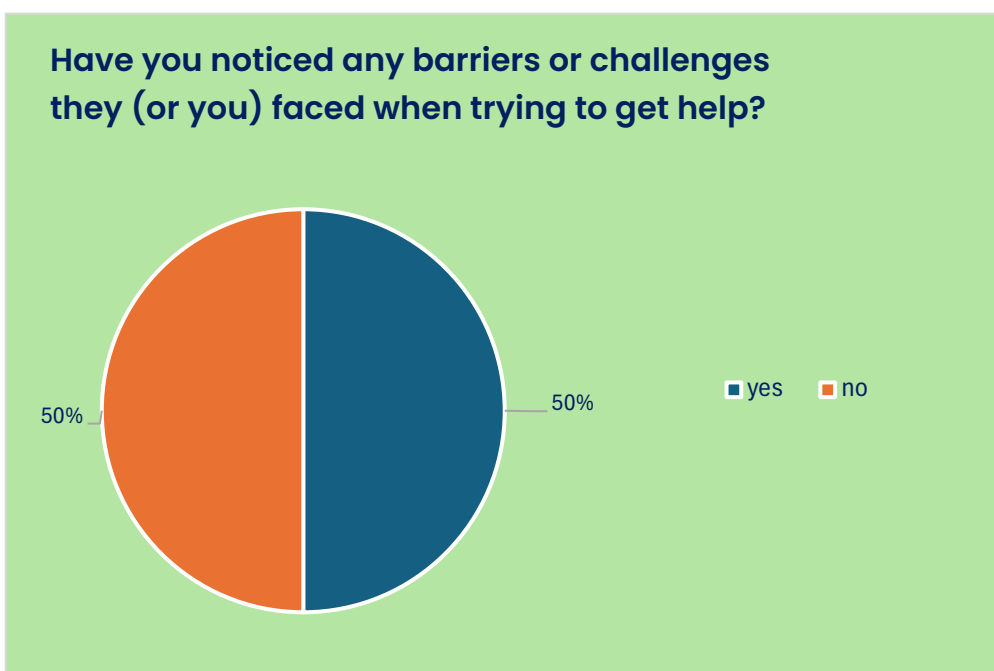
Have you received any support yourself as a family member, friend, or carer?



Friends and Family Survey Responses Appendix 26



Appendix 27



Survey Template for Service users: Appendix 28

Share your feedback (service user): Views and experiences of people accessing drug and alcohol services

What is this survey about?

Healthwatch Bromley is examining the current landscape of substance misuse services in the London Borough of Bromley, and the experiences and views of service users, as well as their family/carers and healthcare professionals.

This survey is confidential and completely voluntary. You can skip any questions you are unsure about or don't feel comfortable answering. We will not be able to identify you, or the person for whom you care, from your answers.

Please tell us what you think by completing this survey and returning it to one of our team members. If you prefer to complete the survey over the phone or would like to describe your experiences in more detail, please phone us on **020 3886 0752**. We can also send you a copy in the post along with a FREEPOST envelope.

.....

1. Have you personally been affected by substance misuse?

- Yes
- No
- Other, please write here:.....

2. About you (optional – tick what applies):

- I'm currently using drug and/or alcohol services
- I've used these services in the past 12 months
- I've tried to access services but couldn't
- Prefer not to say

**3. What type of support have you accessed or tried to access in the past 12 months?
(Tick all that apply)**

- One-to-one key worker support
- Prescribing or detox services
- Group sessions or peer support
- Drop-in services
- Support for mental health alongside substance use
- Support around housing or benefits
- Other, please write here:

.....

4. How easy was it to access the support you needed?

- Very easy
- Fairly easy
- Difficult
- Very difficult
- I haven't been able to access any support

Tell us more (optional):

5. Do you feel the support you received was effective?

- Yes
- No
- I don't know

Tell us more (optional):

6. Have you faced any challenges or barriers when trying to get help?
(E.g. long waiting times, not knowing where to go, not being listened to)

- Yes
- No
- I don't know

Tell us more (optional):

7. Have you ever felt that your personal situation made/makes it harder to get support?
(e.g. co-existing mental health condition, being homeless, gender, having a long-term condition, ethnicity, gender, age, or criminal record)

- Yes
- No
- I don't know
- Prefer not to say

Tell us more (optional):

8. Do you feel involved in decisions about your care and treatment?

- Always
- Sometimes
- Rarely
- Never
- I don't know

9. What service (s) work(ed) well for you?

10. What would make it easier for you to get the right support at the right time?

11. Is there anything else you'd like to share about your experience?

Monitoring – Tell us a bit about you

It would really help to know a little more about you so that we can better understand how people’s experiences of local health and social care services may differ between groups of people; this supports our focus on improving equality, diversity and inclusion. **These questions are completely voluntary.**

What gender do you identify yourself as:

- Man (including trans man) Woman (including trans woman)
- Non-binary Other..... Prefer not to say

Which age group are you in?

- Under 18 18 to 24 25 to 34 35 to 44 45 to 54 55 to 64 65 to 74
- 74 to 84
- 85+ Prefer not to say

What is your ethnicity?

White

- English / Welsh / Scottish / Northern Irish / British Gypsy or Irish Traveller
- Irish Roma Any other white background.....

Asian / Asian British

- Asian British Indian Bangladeshi Pakistani
- Chinese Any other Asian/Asian British background.....

Black, African, Caribbean, Black British

- Black British African Caribbean Any other Black, African, Caribbean background.....

Mixed, Multiple Ethnic Groups

- White and Asian White and Black African White and Black Caribbean
- Any other mixed / multiple background.....

Other Ethnic Groups

Arab Any other ethnic group..... **Prefer not to say**

Do you consider yourself to be disabled?

Yes..... No Prefer not to say

Do you consider yourself to have a long-term condition or health and social care need?

Yes..... No Prefer not to say

What is your religion?

Buddhist Christian Hindu Jewish Muslim Sikh
 Spiritualism No religion Prefer not to say Other
religion.....

What is your sexual orientation?

Asexual Bisexual Gay man Heterosexual/straight Lesbian
 Pansexual Prefer not to say

Are you currently pregnant or have you been pregnant in the last year?

Currently pregnant Prefer not to say Currently breastfeeding
 Given birth in the last 26 weeks Not relevant

What is your employment status?

In unpaid voluntary work only Not in Employment (student)
 Not in employment & unable to work p/week Paid work: 16 or more hours
 Not in employment / not actively seeking work – retired Paid work: less than 16 hours
p/week
 Not in employment (seeking work) On maternity leave
 Prefer not to say

Are you an unpaid carer?

Yes No Prefer not to say

Which Ward of the borough do you live in?

- Beckenham Town and Copers Cope
- Bickley and Sundridge
- Biggin Hill
- Bromley Common and Holwood
- Bromley Town
- Chelsfield
- Chislehurst
- Clock House
- Crystal Place and Anerley
- Darwin
- Farnborough and Crofton
- Hayes and Coney Hall
- Kelsey and Eden Park
- Mottingham
- Orpington
- Penge and Cator
- Petts Wood and Knoll
- Plaistow
- Shortlands and Park Langley
- St Mary Cray
- St Paul's Cray
- West Wickham
- Out of Borough, please specify.....

How we use your information

The information you share with us will also be accessed by our national body Healthwatch England and shared with local health and care commissioners and providers. This helps us spot trends both nationally and locally to identify areas for improvement. We may use quotes in our reports, but we will not use any information that will identify you. Our full privacy statement can be found at:

[\[Privacy Policy - Healthwatch Bromley\]](#)

Confirmation of consent

I consent to sharing my information with Healthwatch Bromley (HWB) as part of their research into ophthalmology services. I understand that my information will be stored in the HWB system for 12 months and will only be used for this piece of research and any updates related to this project.

Thank you for sharing your experience! We recognise that health and care issues can be extremely personal and we appreciate you giving us your time.

Survey Template for Professionals: Appendix 29

Share your feedback (professional): Views and experiences of people accessing drug and alcohol services

What is this survey about?

Healthwatch Bromley is examining the current landscape of substance misuse services in the London Borough of Bromley, and the experiences and views of service users, as well as their family/carers and healthcare professionals.

This survey is confidential and completely voluntary. You can skip any questions you are unsure about or don't feel comfortable answering. We will not be able to identify you, or the person for whom you care, from your answers.

Please tell us what you think by completing this survey and returning it to one of our team members. If you prefer to complete the survey over the phone or would like to describe your experiences in more detail, please phone us on **020 3886 0752**. We can also send you a copy in the post along with a FREEPOST envelope.

.....

1. What organisation do you work for?

(e.g. CGL, Bromley Healthcare, Bromley Well)

2. What is your role or area of work?

(optional)

3. *(If you don't refer people, move to question 4)* How would you describe your experience of referring people to local drug and alcohol services?

- Very positive
- Mostly positive
- Mixed
- Mostly negative
- Very negative

Please briefly explain your answer:

4. What challenges do you observe clients facing when trying to access or stay engaged with services?

5. Do you feel the current services in Bromley are well-coordinated across primary , secondary, and social care?

- Yes
- Partially
- No
- I don't know

Please briefly explain your answer:

6. Are there specific groups of people you feel face particular access difficulties or additional barriers? (Tick any that apply)

- Children and young people
- Homelessness
- COMHAD (Co-occurring Mental Health and/or Drug)
- Ethnic minority community
- LGBTQ+ community
- Parents
- People involved with the criminal justice system
- People with a disability and/or a long-term condition (LTC)
- Women
- Other (please specify).....
- I don't know

7. What do you think is working well within local drug and alcohol services?

8. What improvements would better support individuals affected by substance misuse in Bromley?

9. Are there any resources, training, or support that would help you in your role when supporting people who use substances?

10. Is there anything else you'd like to share about your experience?

Survey Template for Friends/ Family: Appendix 30

Share your feedback (family member/friend/carer): Views and experiences of people accessing drug and alcohol services

What is this survey about?

Healthwatch Bromley is examining the current landscape of substance misuse services in the London Borough of Bromley, and the experiences and views of service users, as well as their family/carers and healthcare professionals.

This survey is confidential and completely voluntary. You can skip any questions you are unsure about or don't feel comfortable answering. We will not be able to identify you, or the person for whom you care, from your answers.

Please tell us what you think by completing this survey and returning it to one of our team members. If you prefer to complete the survey over the phone or would like to describe your experiences in more detail, please phone us on **020 3886 0752**. We can also send you a copy in the post along with a FREEPOST envelope.

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1. What is your relationship to the person you are/were supporting?

- Adult child
- Friend
- Sibling
- Parent
- Partner/Spouse
- Sibling
- Other, please write here:.....

2. Is the person you support currently using drug or alcohol services in the London Borough of Bromley?

- Yes
- No
- They used services in the past
- I don't know

3. Have you received any support yourself as a family member, friend, or carer?

- Yes
- No
- I didn't know support was available

If yes, please tell us what kind of support you received (e.g., counselling, peer support groups, advice):

4. In your experience, how easy has it been for the person to access the help they need?

- Very easy
- Fairly easy
- Difficult
- Very difficult
- I don't know

Please briefly explain your answer:

5. Have you noticed any barriers or challenges they (or you) faced when trying to get help?

- Yes
- No
- I don't know

Please briefly explain your answer:

6. What has worked well?

7. What could be improved in Bromley’s support for people using drugs or alcohol – and for their families or carers?

8. Do you know where to find information or support for those affected by substance misuse? Please include any examples you are aware of

Survey Poster: Appendix 31



SHARE YOUR FEEDBACK

VIEWS AND EXPERIENCES OF PEOPLE ACCESSING DRUG AND ALCOHOL SERVICES

Why is Healthwatch Bromley doing this research?

We want to hear from Bromley residents who are accessing drugs and alcohol services in the borough, with focus on how services are impacting health and wellbeing.

We also want to hear from families and healthcare professionals to document your views, as you have major interaction, advocating for substance users and enabling them to access services.

Your feedback will help us highlight areas for improvement, identify underserved groups, and develop clear recommendations to make services more accessible and effective. By taking part, you'll help shape future support for people affected by substance misuse in Bromley.

How can Bromley residents participate?

You can call or email Healthwatch Bromley to arrange a conversation either in-person, over the telephone or via a virtual meeting.



Service users



Family/ Carer/ Friend



Professional

Healthwatch Bromley
www.healthwatchbromley.co.uk
Telephone: 0203 886 0752
Email: info@healthwatchbromley.co.uk

**Self-Care event Poster:
Appendix 32**



Glossary of Terms

CGL	Change Grow Live
CDAP	Combating Drugs and Alcohol Partnership
COMHAD	Co-occurring Mental Health and/or Drug
CQC	Care Quality Commission
DHSC	Department of Health and Social Care
GP	General Practitioner
HWB	Healthwatch Bromley
HWE	Healthwatch England
ICB	Integrated Care Board
LBB	London Borough of Bromley
LA	Local Authority
OCU	Opiate and crack use
PCN	Primary Care Network
YVHSC	Your Voice in Health and Social Care

References

1. *Opiate and crack cocaine use: prevalence estimates (2022 to 2023)*. Available at: <https://www.gov.uk/government/publications/opiate-and-crack-cocaine-use-prevalence-estimates-2022-to-2023>
2. *Change Grow Live (2024). Bromley Drug and Alcohol Service*. Available at: <https://www.changegrowlive.org/bromley-drug-alcohol-service/services>
3. *Change Grow Live (2024). Bromley Changes – Young People’s Service*. Available at: <https://www.changegrowlive.org/changes-young-peoples-service-bromley/info>
4. *Substance Misuse Needs Assessment (2022)*. Available at: <https://www.bromley.gov.uk/downloads/file/1961/substance-misuse-jsna-executive-summary>
5. *London Borough of Bromley (2024). Substance Misuse: Drug and Alcohol Services*. Available at: <https://www.bromley.gov.uk/substance-misuse/drug-alcohol-services>

Distribution and Comment

This report is available to the public and is shared with our statutory and community partners. Accessible formats are available. If you have any comments on this report or wish to share your views and experiences, please contact us.



Do you feel inspired?

We are always on the lookout for new volunteers, so please get in touch today.

www.healthwatchbromley.co.uk

0203 886 0752

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healthwatch

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 @HWBromley

 [Facebook.com/healthwatch.bromley](https://www.facebook.com/healthwatch.bromley)

 @healthwatchbromley



**Committed
to quality**

Healthwatch was established in 2013 in accordance with the Health and Social Care Act 2012.

Within this legislation [Arrangements to be made by relevant bodies in respect of local Healthwatch Organisations Directions 2013] Healthwatch has a right to a reply within 20 working days to Reports and Recommendations submitted by Local Healthwatch to a service provider.

Report & Recommendation Response Form

Report sent to	Healthwatch Bromley
Date sent	20 May 2026
Report title	Bromley Drug and Alcohol Services - views and experiences of users

Date of response provided	
Please outline your general response to the report including <u>what you are currently doing to address</u> some of the issues identified.	<p>We are proud of the positive findings within this report, which reflect the strong outcomes achieved and the commitment of our staff to delivering compassionate, person-centred care. It is particularly encouraging to see the recognition of the impact of one-to-one support, recovery environments, and the dedication of our workforce.</p> <p>We also welcome the opportunities for further development highlighted. We continue to strengthen coordination across the system through active engagement with partners, co-location with key services, and regular multi-agency working to support individuals with complex needs.</p> <p>Our aftercare offer remains a key strength, supported by a dedicated recovery worker and the development of Bromley's first Lived Experience Recovery Organisation, alongside strong links with mutual aid groups.</p> <p>We aim to respond to all referrals within 24-48 hours and will continue working with partners to ensure access routes and available support are clearly understood, via training and workshops from frontline staff in partner agencies and regular attendance at strategic meetings across the borough.</p> <p>We are also addressing inequalities through our involvement in the borough's Complex Needs Pathway, supported by a dedicated worker and flexible, multi-agency approaches to engagement.</p>

	<p>Outreach and awareness are being strengthened through ongoing partner engagement, training, and the development of a new criminal justice outreach role to better reach under-served groups. We have also improved communication with referrers through a dedicated entry-to-service function and regular interface meetings to ensure consistent feedback and coordinated care.</p> <p>Finally, we remain committed to supporting our workforce through ongoing training, supervision and wellbeing initiatives, recognising that this underpins the high-quality support we provide.</p>
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<p>Recommendation 1</p>	<p>Relationship-based support is a core strength of our service and is reflected in the positive feedback from service users. We continue to prioritise continuity of key workers wherever possible, alongside the rollout of a new recovery care plan in June to support more personalised and responsive care.</p>
<p>Recommendation 2</p>	<p>We have a well-developed peer and recovery offer, including group work and strong links with mutual aid partners such as AA and NA. This has been further strengthened through the launch of Bromley's first Lived Experience Recovery Organisation in 2025, alongside new women-focused provision including a women's morning and a dedicated group within criminal justice services.</p>
<p>Recommendation 3</p>	<p>We have strengthened communication with partners through the introduction of a dedicated entry-to-service function, ensuring all referrers are updated on the outcome of their referrals. This is supported by regular interface meetings and proactive multi-agency communication to improve clarity around engagement, prescribing and discharge planning.</p>
<p>Recommendation 4</p>	<p>We are proud to have strong aftercare provision already in place, including a dedicated aftercare recovery worker supporting continuity beyond structured treatment. This is further strengthened through established recovery pathways, including our Lived Experience Recovery Organisation and links with mutual aid, ensuring ongoing support as people transition from treatment into sustained recovery.</p>
<p>Recommendation 5</p>	<p>We are continuing to strengthen outreach and awareness through active engagement with partners across the borough,</p>

	including attendance at team meetings, strategic forums, and delivery of training and workshops. This is being further enhanced through the development of a dedicated criminal justice outreach role to improve engagement with individuals who may be less likely to access traditional services.
Recommendation 6	We recognise that a skilled and supported workforce is essential to delivering high-quality care. We continue to invest in staff development, supervision and wellbeing through regular reflective practice, training opportunities and strong management support to promote resilience and retention.
Signed	A.McGeown
Name	Annie McGeown
Position	Registered Manager

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Within this legislation [Arrangements to be made by relevant bodies in respect of local Healthwatch Organisations Directions 2013] Healthwatch has a right to a reply within 20 working days to Reports and Recommendations submitted by Local Healthwatch to a service provider.

Report & Recommendation Response Form

Report sent to	Healthwatch
Date sent	21 May 2026
Report title	'Bromley Drug and Alcohol Services - views and experiences of users'

Date of response provided	20 May 2026
Please outline your general response to the report including <u>what you are currently doing to address</u> some of the issues identified.	<p>We very much welcome feedback and are committed to the ongoing development and improvement of the services we commission. We have provided some clarification where elements of the report, particularly in relation to waiting times, are not fully aligned with our understanding of current service delivery. In these areas, it has been difficult to clearly identify the specific issues being referenced and further context or detail would support a clearer interpretation of the findings.</p> <p>We value the opportunity to reflect on the report and have responded to the recommendations focusing on how existing strengths can be further consolidated and where there may be opportunities to enhance consistency and co-ordination across the system. The broader themes highlighted within the recommendations reflect areas of established practice that are embedded within commissioning and service delivery arrangements.</p>

Recommendation 1	<p>Strengthening cross sector co-ordination</p> <p>Public Health response: We recognise the importance of co-ordinated partnership working and note that Bromley already has well-established strategic arrangements in place, including the Combating Drugs and Alcohol Partnership (CDAP), which was established in response to national requirements and brings</p>
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together partners across health, local authority, voluntary sector and criminal justice.

These structures already provide mechanisms for cross-sector communication and joint working. Moving forward, our focus will be on:

- Further strengthening consistency across existing partnership arrangements
- Supporting providers to embed effective multi-agency approaches for individuals with complex needs, recognising that operational delivery of case coordination sits primarily with providers

Recommendation 2

Improve information sharing systems

Public Health response: We agree that effective and proportionate information sharing is critical to ensuring safe and co-ordinated care. Current arrangements already operate within established governance frameworks, with clear consent-based approaches and appropriate clinical protocols in place.

We will continue to:

- Work with partners to reinforce clarity and confidence in existing information-sharing processes
- Explore improvements in co-ordination to minimise duplication and ensure key information is available where clinically appropriate

Recommendation 3

Prioritise individuals with complex and overlapping needs

Public Health response: Supporting individuals with co-occurring mental health and substance use needs (COMHAD), alongside those experiencing homelessness or multiple disadvantage, is a core element of our existing commissioning approach.

We will continue to:

- Commission targeted provision to reduce barriers faced by specific groups, including people experiencing homelessness, young people, and those with COMHAD
- Align service delivery with the needs of those experiencing complex and overlapping challenges, including neurodivergence

	<ul style="list-style-type: none"> We will strengthen this through ongoing service development and use of drug and alcohol needs assessments, population health data and lived experience insights
Recommendation 4	<p>Strengthen housing and recovery pathways</p> <p>Public Health response: We recognise the important relationship between housing stability and recovery outcomes. While housing services sit outside the direct remit Public Health commissioning, there is already partnership working in place to support joined-up pathways.</p> <p>Our focus will be on:</p> <ul style="list-style-type: none"> Continuing to strengthen partnership working with housing
Recommendation 5	<p>Maintain sustainable investment in personalised provision</p> <p>Public Health response: We strongly agree with the importance of personalised, relationship-based support. This is a central feature of the commissioned model in Bromley.</p> <p>We will continue to:</p> <ul style="list-style-type: none"> Actively prioritising sustained investment in one-to-one, relationship-based interventions Support community-based and peer-led recovery environments
Recommendation 6	<p>Embed equity and prevention in strategic planning</p> <p>Public Health response: We agree with the importance of equity, prevention and early intervention. These are embedded within our public health and commissioning strategic approach.</p> <p>We will continue to develop this by:</p> <ul style="list-style-type: none"> Using population health data and service intelligence to inform targeted outreach and early engagement Monitor service access, engagement and outcomes to identify and address inequalities
Further comments	<p>We remain committed to ongoing partnership working and continuous improvement to ensure residents continue to receive high-quality, responsive and person-centred support.</p>

Signed	Finola O'Driscoll
Name	Finola O'Driscoll
Position	Senior Strategist, Public Health.