Islington Showcases

PDS Core Liaison Team

Cross team working, providing link between PDS specialist service and Islington Core team

Think rather than react:
Supporting clinicians to think about clients with complex emotional needs

0.6 Psychologist, 0.1 Consultant Psychiatrist

The things we are doing:

1. Case consultations/advice/treatment recommendations
2. Joint assessments
3. Discuss appropriateness of referrals
4. Bespoke training on CEN

Survey Responses:

1. 100% of respondents felt able to contact liaison
2. Helpfulness rating: 4.58/5
3. Helpful in thinking about A) complex cases B) case formulation C) appropriateness of referrals

NHS
Barnet, Enfield and Haringey Mental Health NHS Trust
Camden and Islington NHS Foundation Trust

What's going well:

1. Collaborative working relationships established
2. Increase in appropriate referrals to PDS from Islington primary care
3. Intervening earlier: Inappropriate referrals not sitting on PDS wait list
4. Core clinicians better able to consider 'readiness for change'

Challenges:

1. High staff turnover across Core teams
2. Balance between providing something useful vs deskilling staff
3. Cultural shift in Core: specialist assessment to caseholding
4. Lack of clarity regarding primary task/shared vision/treatment offer
5. Core Liaison provision not replicated in Camden

Next Steps:

1. Developing clinician confidence- further training workshops planned
2. Case consultation for clients in Core team treatment

Thanks. My name is Liam and I am the C&I PDS Core Liaison.
You can contact me on liam.mcauliffe@candi.nhs.uk

Islington

Camden Showcase

Camden Core Teams Support and Connect – Shahnaz Ahmed

NHS
Barnet, Enfield and Haringey
Mental Health NHS Trust
Camden and Islington
NHS Foundation Trust

"I haven't laughed this much in so long.. Thank you!" – Service User

My new way of working is working flexibly with people in the community and trying to different ways to engage with Bangladeshi women in particular

The ultimate aim for the service is to allow clients to feel at home, confident and able to discuss their mental health issues openly! Giving you a platform to be yourself!

What we provide:

- 1-to-1 support
- Singing groups
- Peer support groups
- WhatsApp groups
- Support with engaging with other community & mental health services

- Understanding people's cultural needs
- How culture affects mental health support
- Understanding taboo's
- Stigma surrounding mental health

The key is to understanding cultural barriers, breaking them down and introducing patients to mental health support by engaging in the support groups provided allow patients to have a positive first experience with mental health support resulting in them being more likely to engage with core mental health services!

Thanks … My name is Shahnaz Ahmed and you can contact me sahmed@mind incamden.org.uk

Camden

JOINT TRIAGE
NORTHWEST CORE TEAM

Barnet, Enfield and Haringey Mental Health NHS Trust

Camden and Islington NHS Foundation Trust

Our new way of approaching referral triage sets out to create a more person-centred experience for clients and learning opportunities for colleagues.

What was the problem?

- We recognised a problem with the triage process when reflecting on both **staff and client experience**.
- The team saw a large number of referrals coming through with a small number of colleagues being involved in the process. This resulted in a slow responsiveness thus effecting the client experience within the service.

How do we aim to make a change?

Using QI Methodology and QI Team support we are set out to work on

1. The time efficiency of triage
2. Staff satisfaction and development
3. The outcomes of referrals

Through creating a **collaborative working environment**, joint triaging can allow colleagues to work across the whole client journey and provide a more **person-centred experience**.

Create opportunity for **learning and development** in the team through pairing colleagues with varying levels of experience from different professional groups to create **diversity in thought and approach**.

New Process

- We have set out to achieve a daily, two-person triage with professionals from different professionals groups.
- Daily triage allows colleagues to get to the referrals from the previous day creating an efficient process - clients are contacted as soon as possible.
- Create time throughout the day for triage discussions to arrive at the most suitable decisions which prioritise client need.
- Create a resilient team able to deal with resource changes.

Next Steps..

- ROLL OUT THE NEW APPROACH ... We are currently at the start of the process.

Thanks!
My name is Paulina/Abhishek, you can contact us on:
Paulina.Zielinska@candi.nhs.uk
abhishek.jha@candi.nhs.uk

Camden

CAMDEN YOUNG PEOPLE'S SERVICE

NHS
Barnet, Enfield and Haringey Mental Health NHS Trust
Camden and Islington NHS Foundation Trust

The Young People's Service (YPS) is a specialist pathway of the Camden and Islington (CANDI) Core Team clinical offer in both Camden and Islington, providing specialist input for young people with complex needs who may require an alternative approach to that currently offered by the Core Teams and/or CANDI Specialist Mental Health Services.

Our **aim** is to: create a more accessible service for young people, and we are influenced by community psychology approaches and co-produced projects such as Project 10/10.

As a **general guide**, in addition to experiencing mental health and wellbeing difficulties, **young adults referred to this team may present with the following**:

- Engagement difficulties – high risk of being discharged due to non-attendance
- Lack of trust in professionals
- A feeling of being let down by services
- Have complicating social issues like housing, leaving care, or involvement with the criminal justice system/youth violence.

The Camden team:

Richard Grove – Operational Lead

Ashley Peart – Clinical Psychologist

Alice Chesterfield – Clinical Psychologist

Jo Judge – Clinical Associate Psychologist

Partnership working

We value and champion partnership working across C&I and we utilise non-clinical community spaces to meet with young people, as well as collaborating with services to provide a joint offer. We also provide consultancy and training for organisations working with young people across C&I.

Haringey showcase

Haringey Personality Disorder Pathway

NHS
Barnet, Enfield and Haringey
Mental Health NHS Trust
Camden and Islington
NHS Foundation Trust

Our new ways of working are trying to -
Address the problems associated with increasing caseload size
Reduce wait times for PD patients, early and timely access to interventions
Remove the experience of 'cliff edges' for PD patients
Reduce reliance on acute care
Improve quantity of and access to evidence based interventions for appropriate patients
Help patients find places in the community to improve and sustain wellbeing
Increase staff satisfaction and staff retention, adhere to trauma informed ideas
Maintain attachment relationships between staff and patients
Improve on and develop existing interventions (SCM and MBT)

What we are doing
Created mini teams within the team, aligned to Core teams (East, west and Central) who screen, assess and offer SCM
Staff training in SCM and MBT
MDT with senior supervision
Here days to review efficacy
Consultations for other teams

Data – Total PD caseload – 260, East – 79 West –69 Central – 51
Other/across area- (MBT, substance misuse - 58

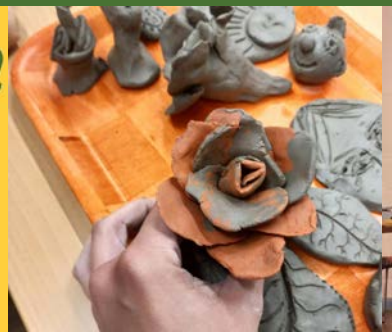
Interesting learning
What's going well …..improved wait times, reduced wait between assessment and intervention
Reduced changes in keyworker
Improved staff morale
More thinking time
How it feels …….less busy, more satisfying, more organised
Challenges …matching staff time and band to need of min team, maintaining cohesive larger team

Next Steps
- Here day in May for team
- Sessions on the pathway for Core Teams
- Outcome measures
- Service user involvement
- GP relationship building
- Increase MBT capacity
- Redevelop SCM group
- Develop interventions in line with local need

Thanks … My name is Cath and you can contact me …….

Haringey

Tottenham Talking



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Barnet, Enfield and Haringey
Mental Health NHS Trust
Camden and Islington
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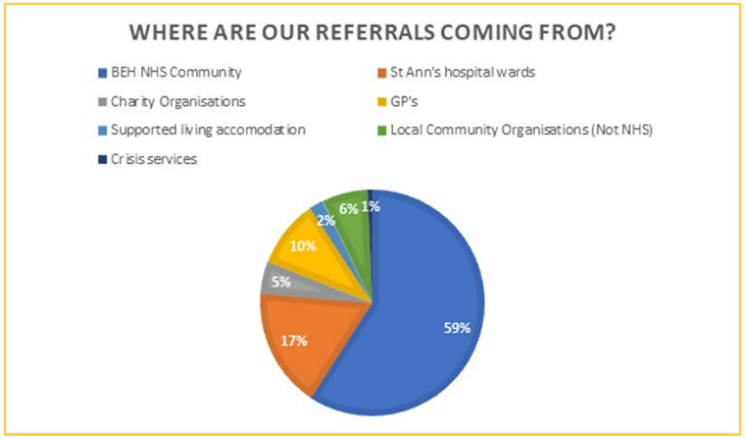
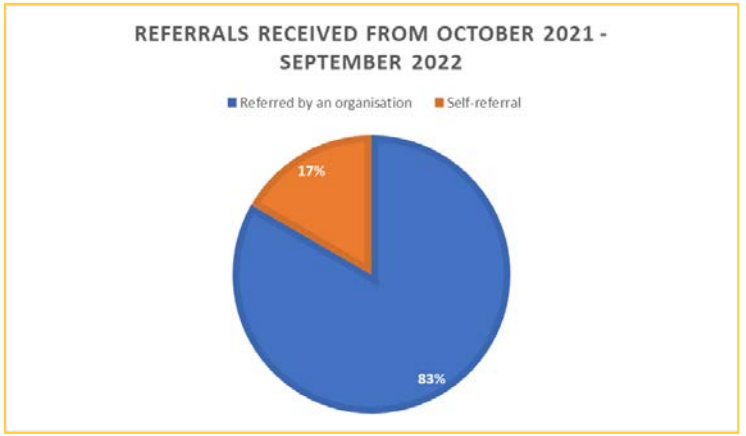
- Over this past year TT has supported approx. 100 local residents experiencing mental health
- With approx. 300 referrals the team have supported many of these to complete intake conversations, of the current statistics 127 intake conversations have taken place
- The project runs a full timetable with up to 14 groups per week with between 2 – 15 per group with an approx. average of 8 per group.
- The team have worked with over 8 different external groups, teams and organisations to design and deliver groups across 4 borough locations and promotional events in many locations face to face and online
- The programme has supported two service users into volunteer roles both whom are motivated and being supported to seek paid employment as peer workers
- 33% of referrals are male
- 62% of referrals are for BAME individuals
- Since March 2022 an expert film maker and service user has been working with TT and participants to make a service user film for the purpose of BEH staff training and community awareness and engagement

"Mindful writing is my lifeline, it has been a solid group that I attend for about a year now. It is crucial to how I have been okay mentally over the last year, I have to thank Janet for this because she plans the group so well. I like how we are given our own booklet of our all work. I do not know where I would be without this group."





If you have any questions please contact Camilla Cox:
camilla.cox@nhs.net

Project delivered in Partnership with

bridge renewal trust
for happy and healthier communities

Top 5 reasons given why people join our project:

1. *Make friends, feel less isolated and lonely* ***(84 participants)***

2. *Build a structure and routine* ***(79 participants)***

3. *Low self-confidence and motivation* ***(54 participants)***

4. *Learn a new skill* ***(48 participants)***

5. *On a waiting list for therapy / seeking something other than medication* ***(27 participants)***

Haringey

Haringey Community
MENTAL HEALTH Occupational Therapy Service

NHS
Barnet, Enfield and Haringey
Mental Health NHS Trust
nd Islington
ndation Trust

Who are the team?
The Occupational OT team is newly formed as part of the community transformation.

Gabriele Dulskyte

Band 5 Occupational Therapist

Christine Lam

Band 6 Occupational Therapist

Janice Rowe

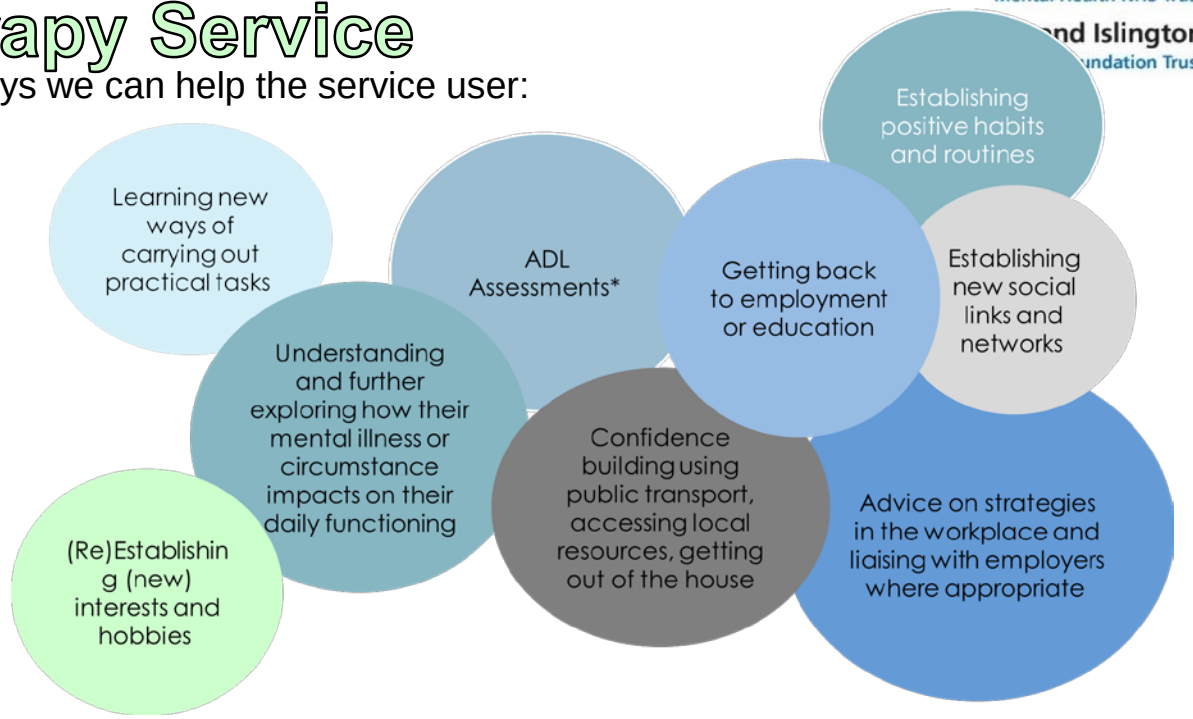
Community Occupational Therapy Lead

Service Aims & Vision

"targeted, intensive and longer-term input for people with more complex needs will be provided at the wider community or "place" level" – Community Transformation

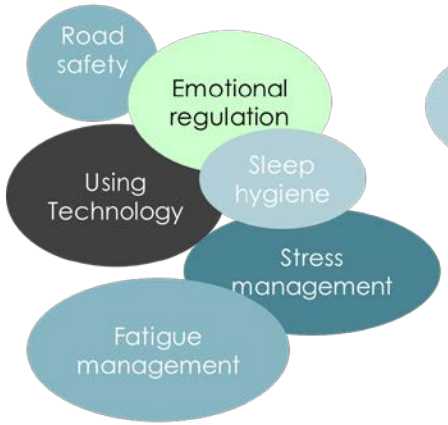
Support recovery rooted in the community

Ways we can help the service user:

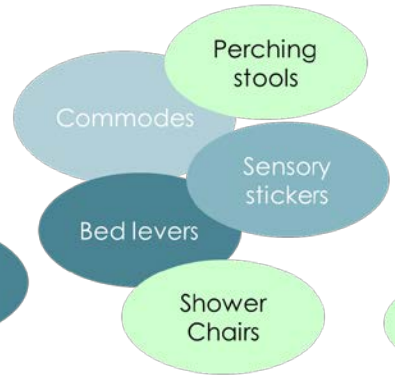


Interventions:

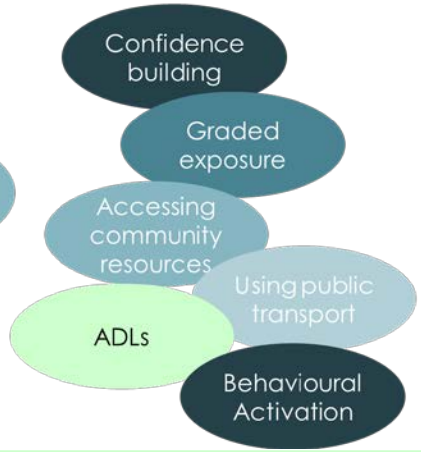
Teaching Strategies in:



Small Equipment Provision:



Motivation & engagement

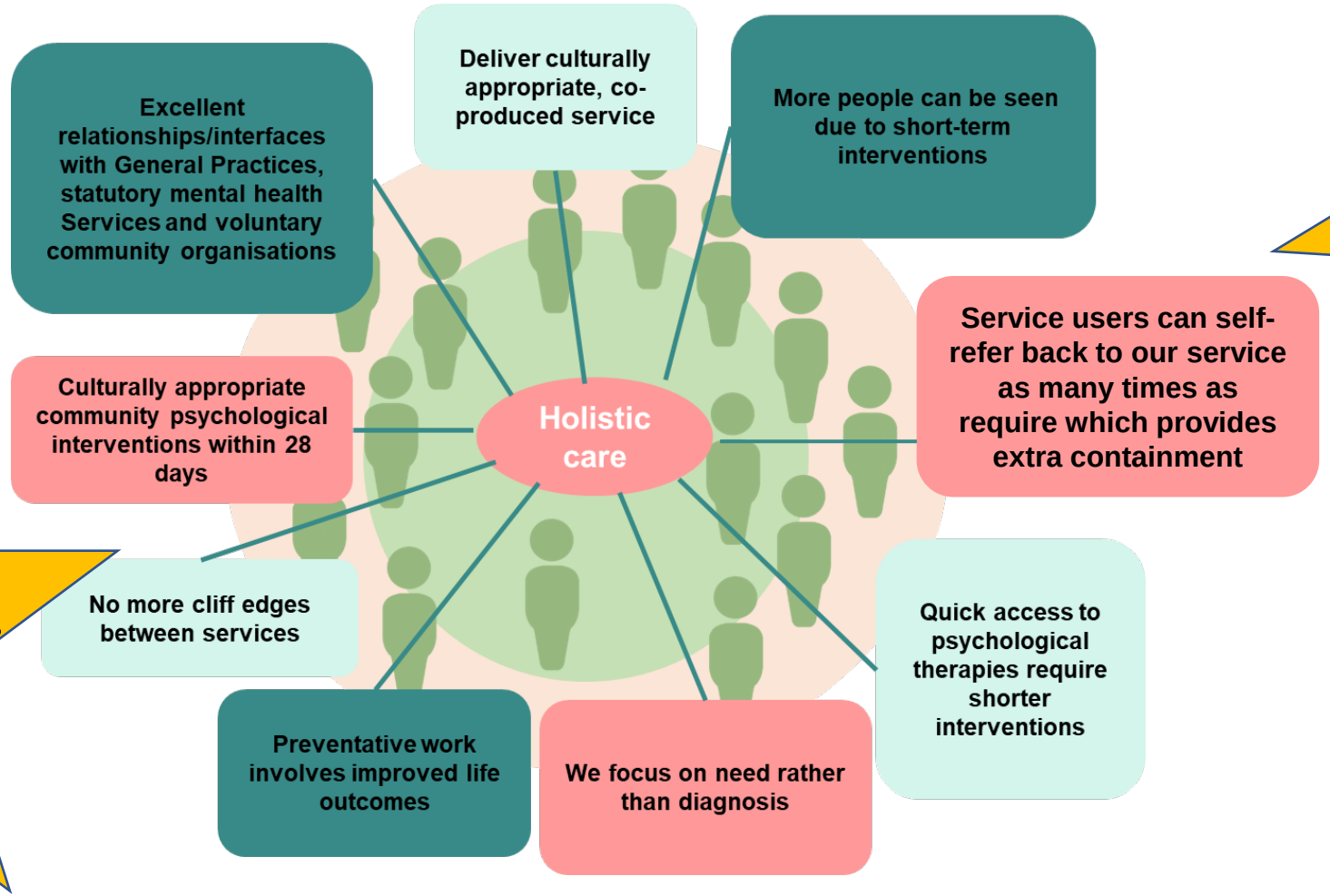


Haringey

Haringey ARRS Primary Care Mental Health Team
Bringing thoughtful and holistic mental health care to Haringey residents

NHS
Barnet, Enfield and Haringey Mental Health NHS Trust
Camden and Islington NHS Foundation Trust

Our new way of working is bringing a co-produced model of quick access holistic community psychological **intervention** to those who had previously fallen through the gaps between mental health services.



Wonderful outcomes (see next page)

Culturally diverse staff group with multiple languages

Contact Sandy
Sandy.Hadley@nhs.net

Haringey ARRS Primary Care Mental Health Team
Experience of Service Questionnaires

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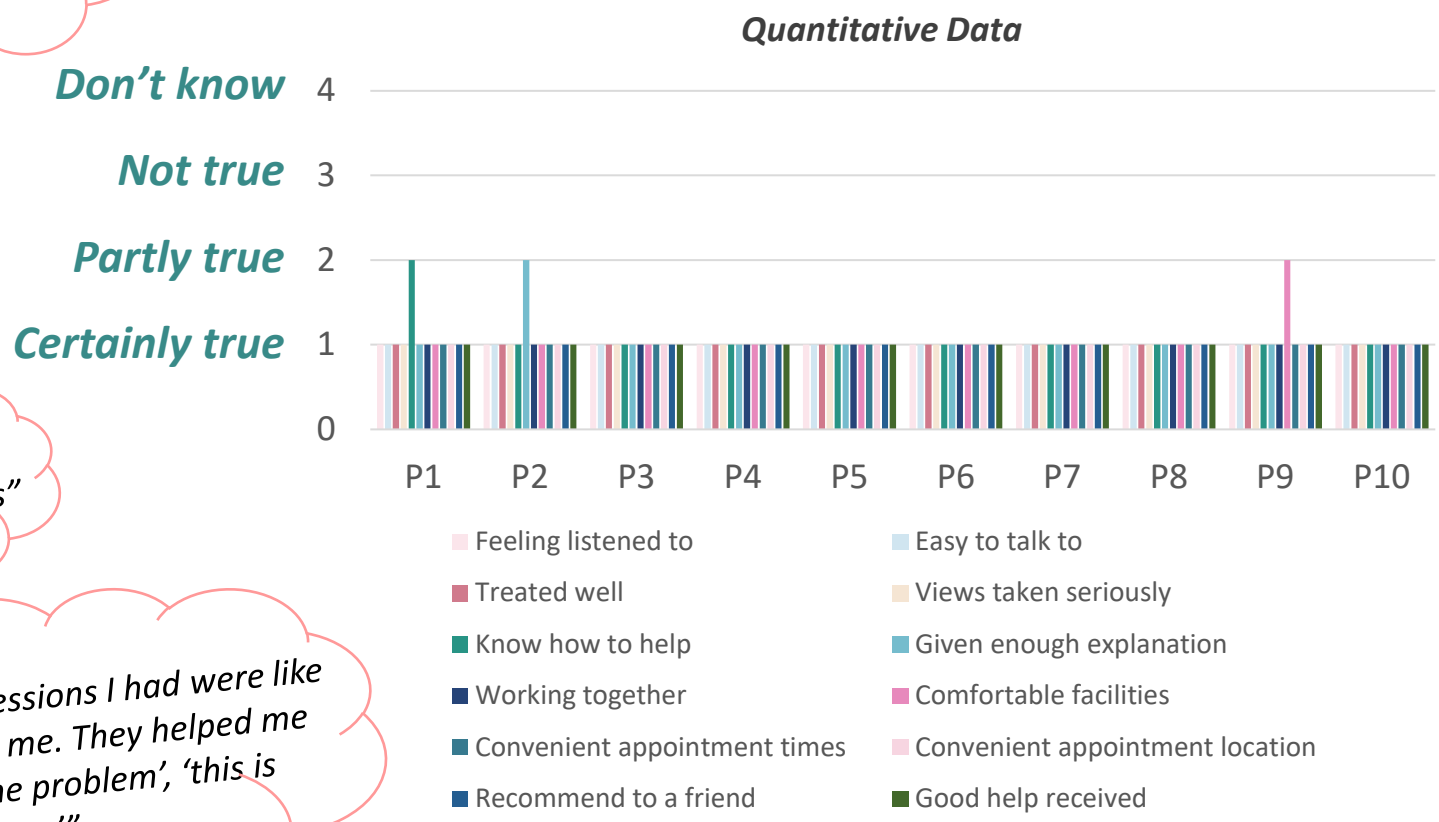
Barnet, Enfield and Haringey
Mental Health NHS Trust
Camden and Islington
NHS Foundation Trust

"I felt it was a safe space I could speak without judgement"

Experience of Service Questionnaire



"With the work we did together I have been able to build better connections with people in my life I wasn't able to properly speak to before"

"I would definitely recommend the service"

"She was very easy to talk to"

"I've come on leaps and bounds"

"The first few sessions I had were like eye openers for me. They helped me to see 'this is the problem', 'this is where I need to go'"

Contact Sandy
Sandy.Hadley@nhs.net

Haringey ARRS Primary Care Mental Health Team
DIALOG+ pre and post scores

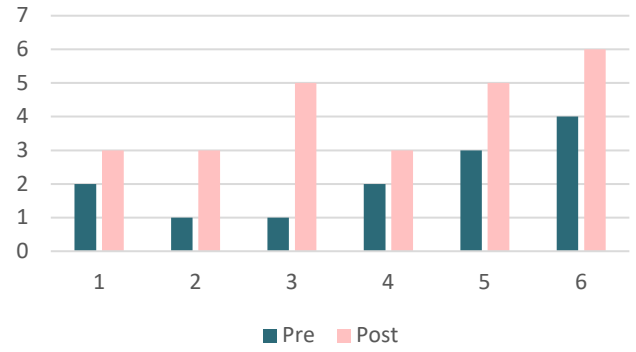
Barnet, Enfield and Haringey Mental Health NHS Trust

Camden and Islington NHS Foundation Trust

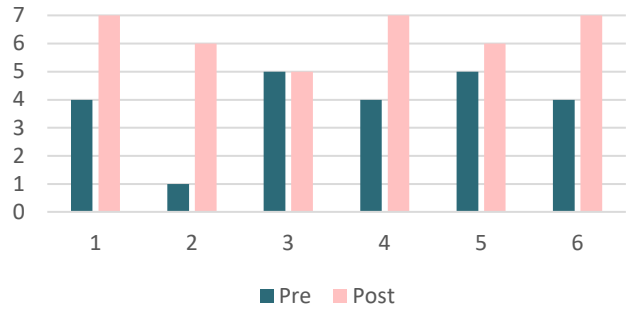
(1)	Totally dissatisfied
(2)	Very dissatisfied
(3)	Fairly dissatisfied
(4)	In the middle
(5)	Fairly satisfied
(6)	Very satisfied
(7)	Totally satisfied

DIALOG+

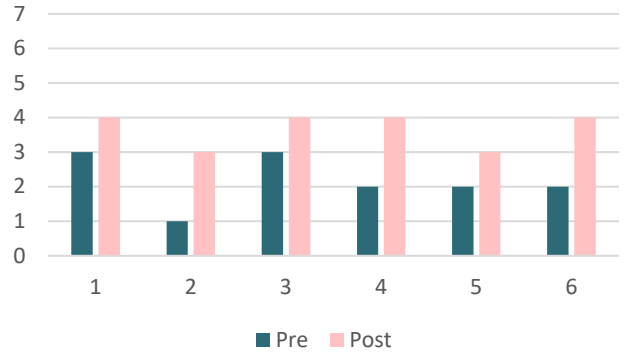
How satisfied are you with your mental health?



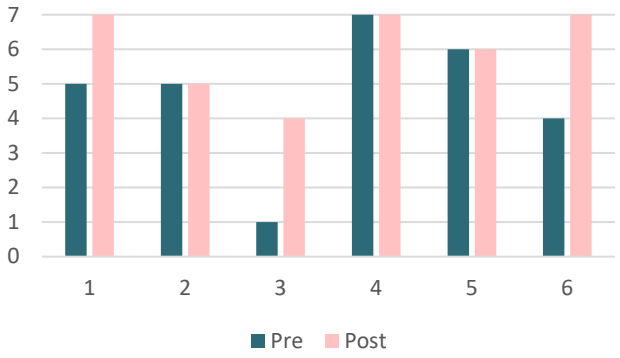
How satisfied are you with your meetings with mental health professionals?



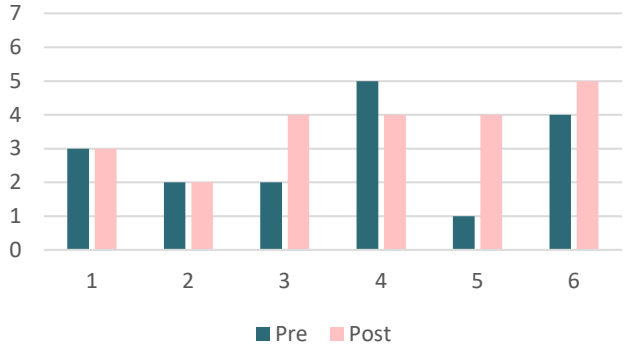
How satisfied are you with your physical health?



How satisfied are you with your accomodation?

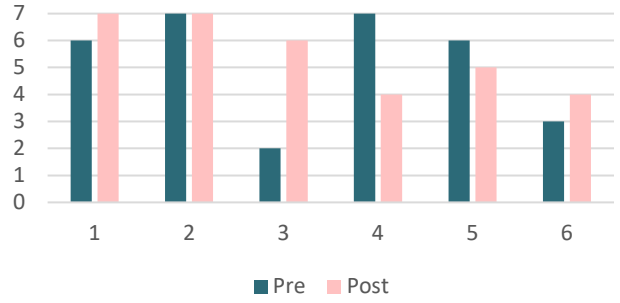


How satisfied are you with your leisure activities?



*4 = Possible decrease related to increased understanding of need to put self-first & make time for herself e.g. to do leisure activities.

How satisfied are you with your relationship with your partner/family?



*4 = Possible decrease due to anxiety around change in saying 'no' to others and challenges of communicating feelings to family members.

**5 = New perspective on how protection provided by a family member is actually preventing them from living their life to the fullest.

Enfield Showcase

Enfield Carers Centre
Empowering Carers

NHS
Barnet, Enfield and Haringey
Mental Health NHS Trust
Camden and Islington
NHS Foundation Trust

Enfield Integrated Core Mental Health Team Carer Group with Enfield Carers Centre

JOIN US

at the 137—143 Britannia House,143 Baker St, Enfield , EN1 3JL

Every last Thursday of the Month

Between 10AM and 11.30AM.

PEER SUPPORT

ADVICE AND INFORMATION

CARERS

PSYCHOEADUCATION

WELLBEING

The group is intended to be carers led, with guest presentations and an opportunity to reflect on being a carers and carers experiences, including the impact of caring for a loved ones on the carers mental health.

Facilitated by Dilek, Valentina and Mark
020 87025022- beh-tr.etsadminmailbox@nhs.net

Enfield

Moving Forward Group –

Enfield Integrated Core Mental Health Team:
Complex Anxiety Disorders and Depression Pathway

Barnet, Enfield and Haringey Mental Health NHS Trust

Camden and Islington NHS Foundation Trust

We launched our first group in January, our second and third groups will be starting in the next month or so. Our waiting list by then is expected to be reduced by about 70-80 people (reducing around 4-5 months of waiting time for our clients).

Our new ways of working is trying to **get people trauma informed psychological help quickly**

The problem we are trying to address ……..

Not only are we addressing the 18 month waiting list, The Moving Forward Group is an opportunity for our clients to…

- Share experiences, offer and receive support.
- Receive education about the impact of difficult life experiences on mental health, learning to cope with the impact and keeping safe.
- Start to engage with changes they want to make.
- Learn and practice skills to manage distress more easily.
- Acquire tools to use outside of the group to help them become their ‘own therapist’.

As the sessions progress in the 13 week programme, people are opening up more and engaging well. It’s still early days but we hope our clients gain hope and confidence, and enjoy better mental health from the Moving Forward Group.

Next steps…

- To continue to roll out groups, both online and face to face.
- To have each psychologist on the team co-facilitating a group so we have continual group offering
- To ultimately achieve a target of clients only waiting 4 weeks before being seen by us.

Thank you from Grace (Assistant Psychologist) and Madeleine (Counselling Psychologist).
You can contact us on:
grace.jeffery@nhs.net ,
madeleine.roantree@nhs.net

Enfield

Step and Thrive

This new way of working offers:

- Holistic well-being support in the community.
- Providing an integrated stepped-care pathway for those being referred into and/or completing support with secondary mental health services.

Step and Thrive aims to be accessible, relevant, and effective

Next steps…

- Recruiting into Workforce
- Running Pilot groups
- Create pathways with community services
- Targeted engagement with marginalised communities

Thanks
My name is Erina Fahy and you can contact me on
Erina.fahy@nhs.net

What this looks like

Accessible support in the community.
Delivered in safe and accessible community setting across Enfield.
Creating community integration for service users by forming pathways with other community-based services.

Co-produced with people with lived experience.
The project will blend psychological expertise alongside lived experience. People with lived experiences will be involved in decision-making, innovation, and the operational delivery of the project

Address holistic well-being needs.
These include emotional, social, occupational, and practical needs.
All groups and activities will be underpinned by psychological approaches

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Camden and Islington NHS Foundation Trust

DIALOG + Enfield

NHS
Barnet, Enfield and Haringey
Mental Health NHS Trust
Camden and Islington
NHS Foundation Trust

What is it !

Following the new NHS England guidance, **Dialog** and **Dialog +** are new tools that will help transform community care. **Dialog+** is a therapeutic intervention, designed to measure how clients rate their quality of life and their experiences of the care and treatment they receive.

Dialog + ensures that care and support are co-produced, holistic and personalised. This is done by reducing unnecessary paperwork in the care setting and putting the focus on our service users.

It is a new care planning approach which will replace the Care Programme Approach (CPA)

"I have found Dialog + very useful and effective. It is easy to learn and use.

It's fast, effective and simple to understand. I feel it will allow health care professionals "get to the point" with their service users, avoiding long and potentially re-traumatising conversations.

It allows patients to be heard and makes it easier for professionals to be specific about the interventions they can offer, as it focuses a solution-focused and strength-based approach.

What I like most about it most is that due to its simplicity it will allow us to revisit and re-assess the treatment received by our clients. Thus we can be more dynamic with the care we provide and improve on what is not working for our client. In this sense it provides an opportunity to measure quality of life and quality of care over time.

As a clinician I can work together with my service user, towards making a meaningful and lasting difference to their wellbeing." – Nikos Koukides Assistant Psychologist (Enfield MH - SPA)

Dialog is a scale of 11 questions. People rate their satisfaction with eight life domains and three treatment aspects on a 7-point scale. Responses can help structure a conversation with healthcare professional about which areas are important to clients, putting them at the centre of the conversation.

Dialog + is taking things one step further. Using the rating provided, key areas are identified. Clinicians can then explore and address the identified problems.

It's a 4 Step Approach→ ***1) Understanding 2) Looking Forward 3) Exploring Options 4) Agreeing on Action***

Physical Health

Physical Health Practitioners offer:

- Regular health checks for all community mental health service users including blood tests
- Help with stopping smoking
- Help and advice with managing physical health conditions including diabetes and being overweight
- Introductory support with physical fitness activities and linking in to sport and leisure activities across Enfield

We are:

Surendra Appadoo (Enfield South CORE Team)
Heema Bhatt (Enfield North CORE Team)
Mrinal Madub (Enfield Community Rehab Team)
Zoe Silverthorne (Enfield Early Intervention Service)

What this looks like

- **Accessible support in the community**
  Delivered in safe and accessible community settings across Enfield.
  Creating community integration for service users by forming pathways with other community-based services.

How about walking? *Research shows that going for a brisk walk for 30 minutes can lift your mood, reduce anxiety, improve your heart function, help with weight gain and help you feel in touch with the world. If you'd like to join a walking group - let us know!*

Help and advice

- Diabetes
- Smoking and other substances
- Healthy Eating
- Weight problems
- Blood Tests

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Barnet, Enfield and Haringey Mental Health NHS Trust
Camden and Islington NHS Foundation Trust

Barnet Showcase

BARNET ARR'S TEAM

Thanks My name is Gina Broughton & you can contact me on gina.broughton@nhs.net or 02087023040

NHS
Barnet, Enfield and Haringey Mental Health NHS Trust
Camden and Islington NHS Foundation Trust

Our new ways of working is trying to improve access to mental health & support for those requiring a quick response in primary care, to alleviate pressures on existing staff, & improve the quality of care & services.

Referrals are received by practitioners from GP or GP receptionists, logged into MHP diaries. The team work in GP practices, conducting 45 minute consultations either F2F or telephone with dual documentation on Rio and Emis.

What's going well The things we are doing:

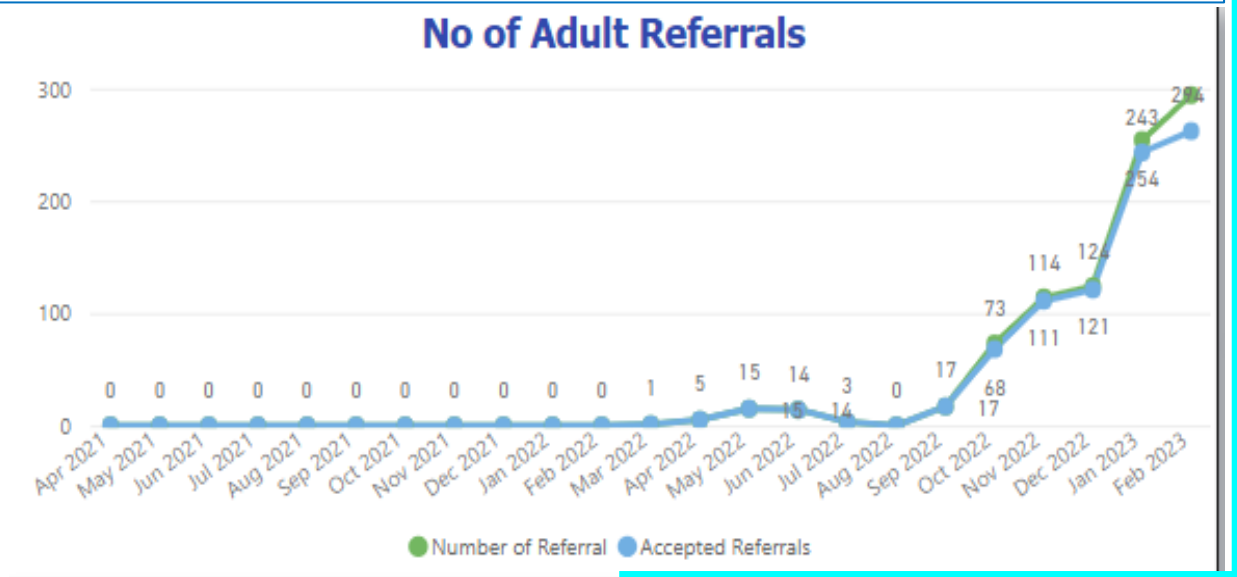
- Access to appointments direct via GP.
- Collaborative working with a wide range of colleagues in GP practices, interfacing with all community resources to coproduce the best treatment plan using a biopsychosocial model and trauma informed care framework.
- Provision of brief psychological intervention & support.
- Facilitation of access to psychiatrist for advice, advise on and prescribe (once qualified) medication, or order tests and organise treatment.
- Demand and capacity increasing since launch, mild to moderate presentations expected varied from mild to severe mental health difficulties with some requiring crisis intervention.

Next Steps

Ongoing interfacing work with all services. Patient feedback survey to include personalisation. Review of DNA and future plans presently at 20%…

Snapshot from one PCN

Month	Surgery 1			Surgery 2			Surgery 3			Surgery 4			Grand Total 88		
	V	F2F	ratio	V	F2F	ratio	V	F2F	ratio	V	F2F	ratio	V	F2F	ratio
Nov 21 to Jan 12	21	8	21:8	6	2	3:1	27	9	2:1	0	15	0:15	**54**	**34**	**54:34**



" You do not how much it helps me to get on with my life, these sessions are therapy for me"

I am so grateful for the support I received and I do not know what I would have done without it"

"Today's session was really helpful. It gave me another perspective on life so thank you"

Barnet

Improving Access to Community Mental Health Services via Dialog +

NHS
Barnet, Enfield and Haringey
Mental Health NHS Trust
Camden and Islington
NHS Foundation Trust

Our new ways of working is trying to ensure all patients receive care plan review through Dialog + and easy access to services.

Work jointly with VCS staff to ensure patients are offered different community services
Patients/ Carers and Families are offered psychoeducatio through new groups which are in development.

"I feel involved in the assessment process"
"I feel heard"
"I am involved in planning my care"
"Can I have a copy of Dialog +"

The problem we are trying to address ……..

- Manage the amount of referrals and allocations requested through implementation of daily referrals/ allocation. This helps keep a flow and avoids delays.
- Offer Dialog + slots to existing patients while managing new cases.
- Support staff to ensure Dialog + is offered at appointments

Interesting learning- It helps to guide sessions and focus on particular aspects of individuals lives and care.
It supports building therapeutic relationship and offers continuity of care .

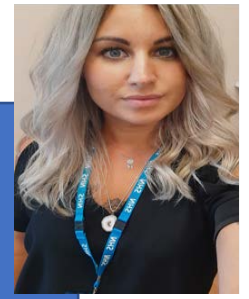
- Patients show initiative and interest to type their own care plan.

The things we are doing……..

- Attend daily referrals meeting/allocations
- Allocating new referrals for Dialog + for all patients within 4 weeks through our Wellbeing Practitioners and offered a 6 week follow.
- We are collaboratively working with Psychology Hub to develop new groups.

Next Steps……..

To start facilitating groups for patients and family/carers.
To ensure that Dialog + is used to assess 80% of new cases by the 1st of September.
Ensure all professionals share good practice in using Dialog +



Thank you
My name is Joanna Betlinska
Senior Practitioner
you can contact me on
j.betlinska@nhs.net
Barnet North Core Hub

COMMUNITY ENGAGMENT PRACTITIONER (VCS)

NHS
Barnet, Enfield and Haringey Mental Health NHS Trust
Camden and Islington NHS Foundation Trust

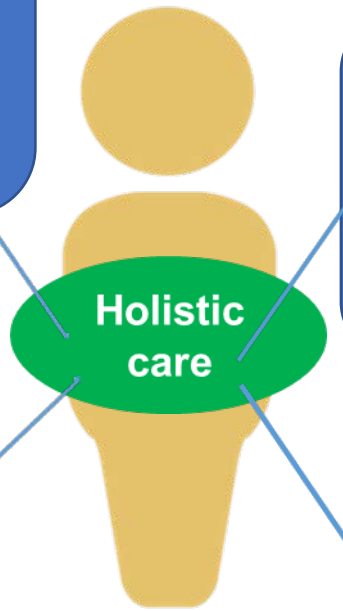
Our new ways of working is using the skills and experience from the voluntary sector to provide our patients with an holistic approach to their recovery

The problem we are trying to address:
The prevention of relapse, by giving our patients the tools to independently manage their mental health

The things we are doing:

- Using Dialog+ to create goals and plans
- Referring patients to various services
- Liaising with the members of the MDT to offer continual support and care
- Building relationships with other organisations in the community
- Working in non clinical environment
- Acting as a link to community services for both clients and the wilder MDT
- Seeing beyond the diagnosis

Mental health:
Scored: 4 – In the middle
Goal: Make friends in the community
Attend art and sowing class
Outcome: Awaiting classes to start in April
Attending walking group with Age UK – where she has made friends



Friendships:
Scored: 2 – Very dissatisfied
Goal: Attend a social activity a month
Outcome: Walking with Age UK
Digital class room - to learn about computing
Attend yoga classes

Employment:
Scored: 5 – Fairly satisfied
Goal: Find voluntary work
Outcome: She found a voluntary role working in a charity shop

Relationships
Scored: 5 – Fairly satisfied
Goal: no goal was made
Outcome: Awaiting to attend family psychology

Next Steps:

- Continue to create relationships with organisations in the community

Thanks … My name is Tracy Kayima and you can contact me tracy.kayima@nhs.net

Community Engagement Practitioner (Inpatients)

NHS
Barnet, Enfield and Haringey
Mental Health NHS Trust
Camden and Islington
NHS Foundation Trust

Our new ways of working is working towards replacing CPA meetings on the wards with Dialog+ assessments and reviews

The problem we are trying to address is to maintain and improve inpatient service user's lives in the community even if they are not open to a Community Mental Health Team

"Thank you for helping my grandson James and calling you as you truly are, a true warrior in all you do past present and into the future etc, A Man For All Seasons Etc

I wish you all out success now and into the future and beyond.

ONWARDS AND UPWARDS"

In addition to attending CPA meetings on the wards, I arrange one to one sessions with inpatients for Dialog+ assessments which allows me to identify their priorities and develop a more holistic care plan with the Multi-Disciplinary Team

Next Step is to completely replace CPA meetings with Dialog+ assessments and reviews

Thanks … My name is Kirk Young and you can contact me at Barnet North Core Hub - 02087026001

Barnet Community VCS Peer Workforce

Ella Goldberg – Peer & Engagement Practitioner

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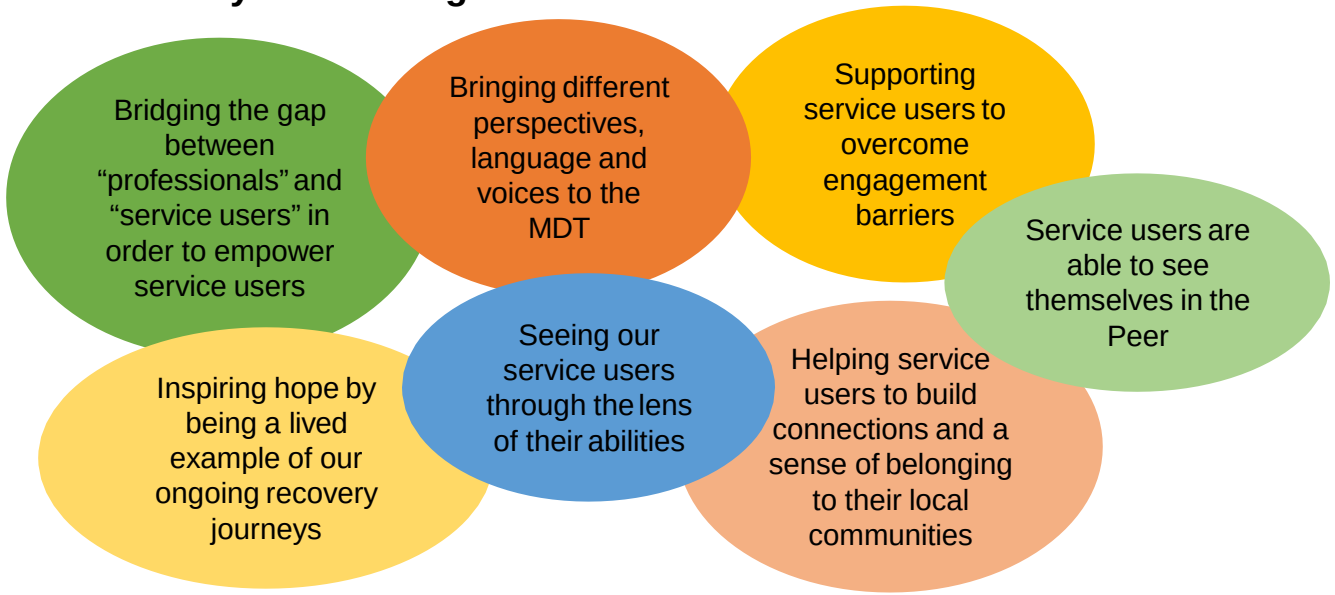
In partnership with mind

Who are the team?

- VCS Peer & Engagement Practitioners are an integral part of the community transformation, located in the Barnet CMHTs.
- A new collaboration between the Voluntary Care Sector and BEH MH services.

Our new ways of working are:



Next steps

- **New project in motion** – developing a Service User Led Café in the Dennis Scott Unit.
- Building more partnerships with community organisations.
- Co-leading Peer Support groups with community organisations.

"Throughout all my years in CAMHS and Adult MH services I had never felt understood before, but this had changed upon working with my Peer Practitioner."

"Thank you so much for your support, patience and perseverance with our young person. She wouldn't be getting seen by the PD team if it wasn't for you!"

"Having a Peer in my medical review was like having a translator in the room."

Challenges!

- Lack of understanding and knowledge around the roles
- Embedding the roles without support or structure in place
- Job parity with NHS employed Peers

Trust Wide Showcase

C&I's ambition to be a Trauma Informed Organisation

Whole organisational change is required to fully embed a trauma informed approach

Change and learning must start from the top of the organisation

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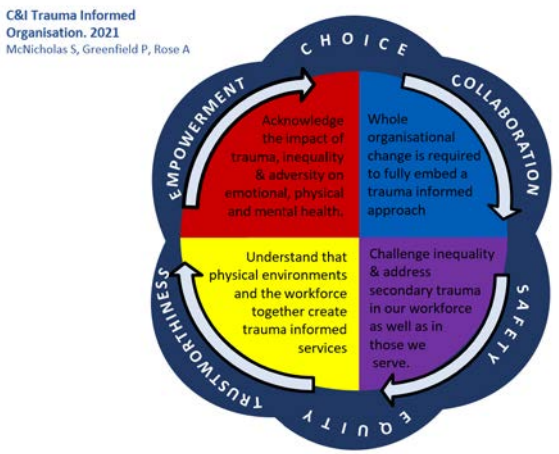
What is a Trauma Informed Organisation

The London Health Board, the NHS Long Term Plan, and the NHS Mental Health Implementation plan all **promote the adoption of a trauma informed approach in mental health**

A Trauma Informed NHS Organisation recognises and acknowledges **the impact of childhood adversity, trauma in adults and wider systemic inequality** on the development of mental health and physical health problems. It seeks to create conditions that reduce harm and promote healing, especially for individuals who have already experienced trauma.



Organisational Achievements and Progress

- Mandatory e-learning for clinical staff, TI as part of induction.
- Monthly trauma informed training sessions (staff, service users, carers welcome - 500 attendees in the past year).
- Trauma Informed Collaborative (TIC) and Hubs established.
- Trust 'position statement' agreed with HR to be added to job descriptions/recruitment process/ library of trauma informed interview questions.
- Updated Risk Assessment with mandatory data fields to support sensitive routine enquiry and allow effective data collection.
- Organisational and clinical service audits; development of' Trauma Informed Environmental audit and protocol (pending).
- Engagement with lived experience partners and recruitment of a lived experience trauma post.
- Collaboration with the AR-DSA network and staff networks to deliver regular program of diverse awareness raising webinars.

Challenges and next steps

Challenges	Next Step
New divisional and leadership structure	• Orientation and training of new senior leadership and Board. • Review of governance structure.
Partnership strategy and progress	• Embed the TI model and strategy into the new shared Clinical Strategy and Partnership Strategy. • Identify second Board Champion. • Build network members and resourcing from BEH partners to create one Trauma Collaborative Network.
Transformation of sites and community services	• Engage Transformation Leads within the Trauma Informed Collaborative creating Hubs in specific areas.
Sustaining ring fenced project management time	• Establish funding and if a business case is required.
Embedding TI in all strategies and policies	• Embed TI position statement in all policies and strategies.

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Community Mental Health Transformation: Community Rehabilitation Specialised Workstream

North Central London Integrated Care System

To focus on successful prevention and optimising independency, to support people to live in the community as independently as possible.

The Community Rehabilitation Specialised Workstream, is an NCL wide project that aims to create a sustainable and affordable model across NCL, that addresses inequalities, spreads good practice and further improves outcomes for residents with severe and long-term mental illness within the community.

The project will bring together the different community rehab models across all 5 Boroughs to develop a robust community rehab pathway model and provide cross-council and multi-agency partnership resource and management.

The project comprises of four workstreams that feed into the overarching **Community Mental Health Rehabilitation Leadership Group**, chaired by Jo Carroll, Managing Director for Enfield and Dr Ian Prenelle, Clinical Director Community Mental Health Transformation

Care Market Development Richard Elphick, Adult Social Care NCL Lead, Camden LA Mary Jacobs, Assistant Director of Complex Individualised Commissioning	**Out of Area Housing** Tim Miller, Joint Assistant Director for Vulnerable Adults and Children Sisa Moyo, Interim Managing Director for Projects	**Population Health Outcomes (Outcomes & Finance)** Akin Adepoju, Contracts Lead supporting MH Commissioning	**Service Models and Pathways** Dr Saeed Alam, Consultant Psychiatrist James Mass, Director of Adult Social Care, Barnet LA
Ensure the current health, care and wider needs of our residents are effectively met in accommodation settings Understand potential future demands, any unmet needs and resourcing Commissioning planning and market development planning Support implementation for the new clinical community rehab offer as it affects accommodation providers	To agree a common approach to providing care and treatment for people with psychosis and in a supported living or residential care home which is not in their ordinary residence; People moving between NCL boroughs People moving from other areas into NCL	Population Health Needs Analysis - profile of current users of community rehabilitation services by demographic, borough of origin, residence and diagnoses Develop a common outcomes and KPI set to enable learning, support QI, enabled benchmarking and enable accountability across the system A costed version of the core offer service description, based on the output of the Service Models and Pathways workstream Support the development of invest to save plans A cross-border funding model	Develop Rehab services, and clinical models across each Borough, using NICE Rehab Guidance and in line with the NCL Mental Health Core Offer To recommend staff/skill mix that is needed across all Community Rehab Teams and derived from NICE Rehab Guidance To agree eligibility criteria for patients accessing community mental health rehab pathways

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How MaST digital tool changes team management in Haringey East Core

Thanks
My name is Ephraim, and I am the Haringey Team Manager.
Contact me for more details: ephraim.chitenhe@nhs.net

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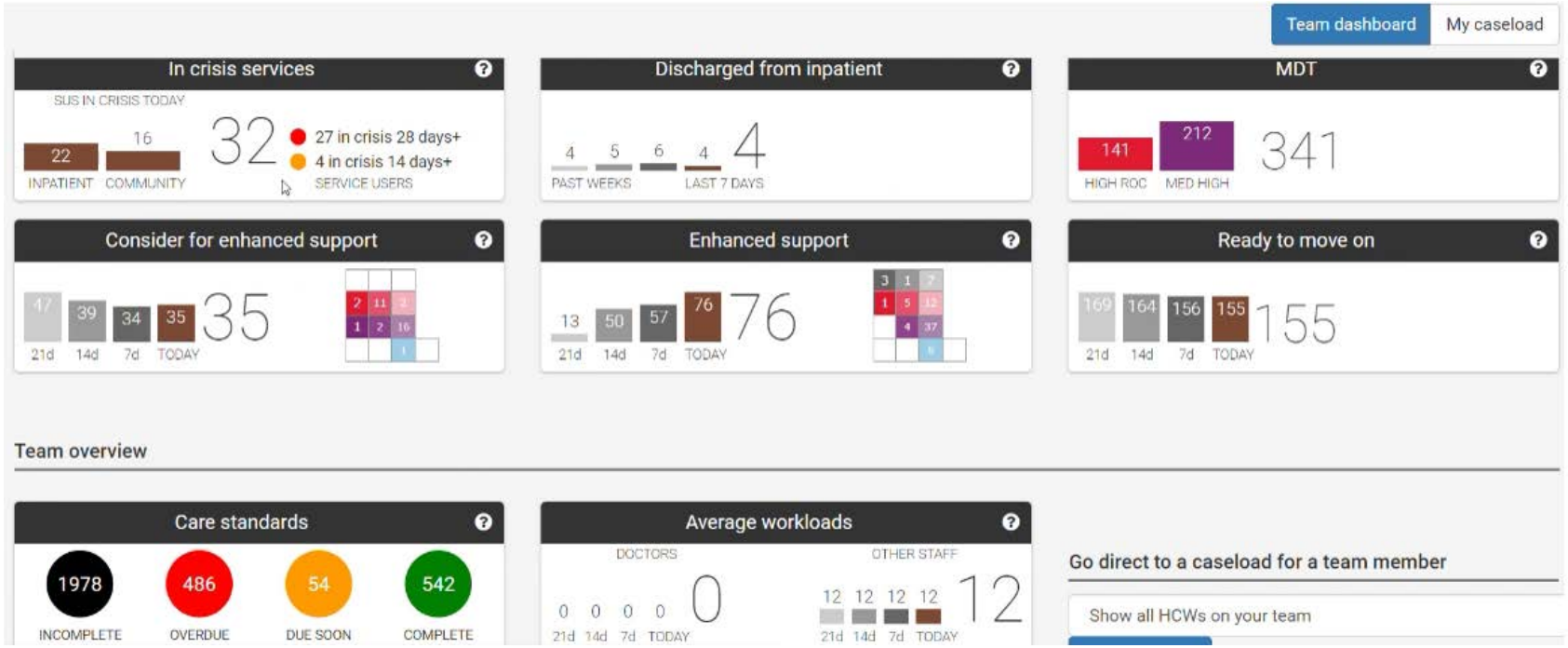
New way of working supports **people to get help quickly** and **step people down**

The CPA 'list' was a way teams reviewed people who were complex, had risk or additional needs. We are no longer going to allocate this category to people, so how will we know who needs more support?

What MAST does?

- Make info on patients available to everyone – data is transparent.
- Really helps having everything a service user needs really obvious.
- Identifies people who are heading to a crisis, but also does early identification of "enhanced support"
- We can see when a team member needs some support
- Really stops the manager micro-managing! I am not breathing down peoples necks, as I can see who is at risk, and can check on the support they are getting



Next steps……

- Getting all staff to use it more. Not everyone can see the benefits to staff and SU yet
- Thinking about how we use it more in clinical meetings and supervision, and how to structure our clinical meetings
- Working more with Ready To Move On people – the reason we all wanted to work in MH services is to see people recover

THE COMMUNITY OF EXCELLENCE

An NCL peer workforce initiative

The Peer Workforce needs to be well recruited, trained and supported to work effectively and forge careers across North Central London

Aims of the Community of Excellence

1. More visibility of Peer workers and help organisations recognise their value, support wellbeing and provide training, development and opportunities for career progression
2. Support standardisation across boroughs where needed, and explore and learn from the different approaches in different boroughs where needed.

Gathering stakeholders, understanding priorities and creating a vehicle for them to continue to inform workforce development.

Two years of listening events and liaison to amplify the voice of local peer practitioners and their allies to identify what is needed. **Creating an ongoing, sound, NCL source of peer workforce expertise and leadership to inform quality and growth.**

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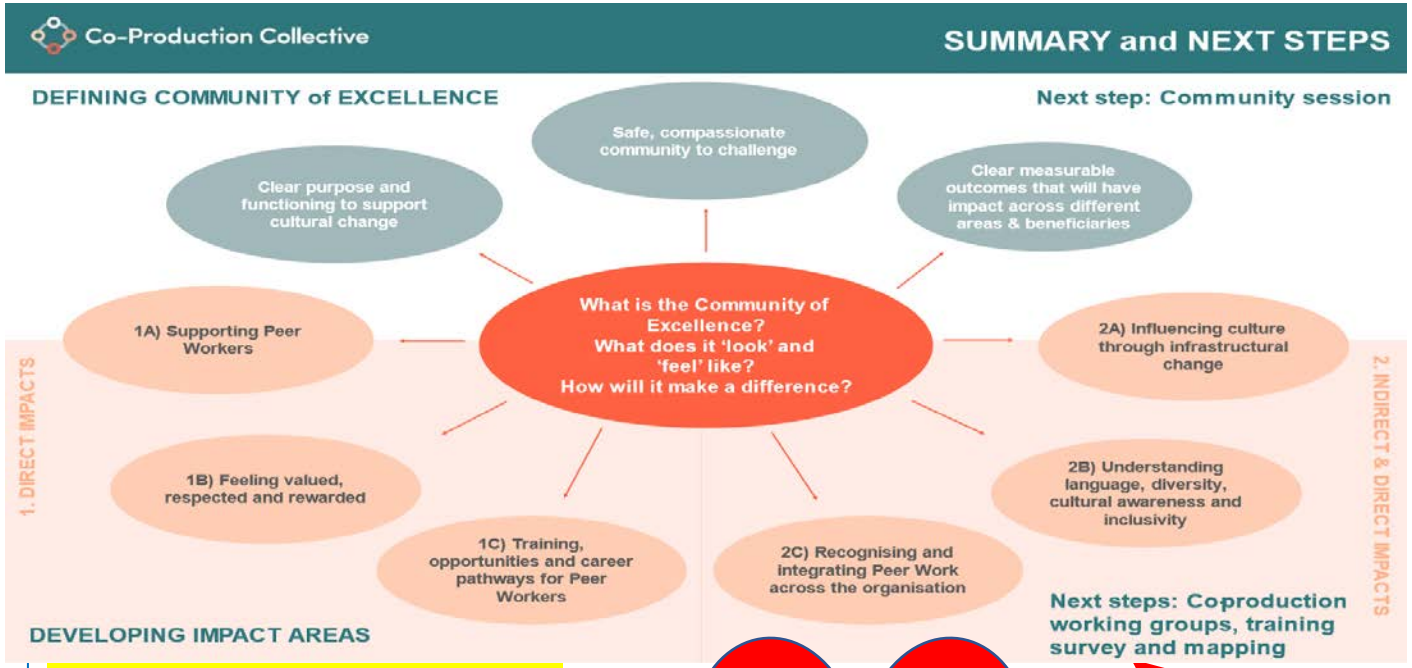

We are clear on priorities.

Next we will 1. reach out farther into communities and groups offering peer support 2. create coproduction working groups to create and act on a plan of action.

20th April Planning event

The Coproduction Collective
coproduction@ucl.ac.uk
Cerdic Hall
Cerdic.Hall@candi.nhs.uk
Georga Robinson
Georga.Robinson@nhs.net

Corporate

Talk For Transformation

"Very helpful in allowing space and time to think about transformation as a process. Getting everything into perspective and calming the nerves"

"The programme highlighted the powerful part I potentially have or play in improving mental health services and also that I am not alone in doing that. Together we can make such a difference!"

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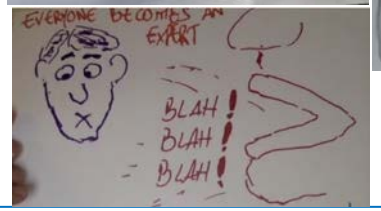
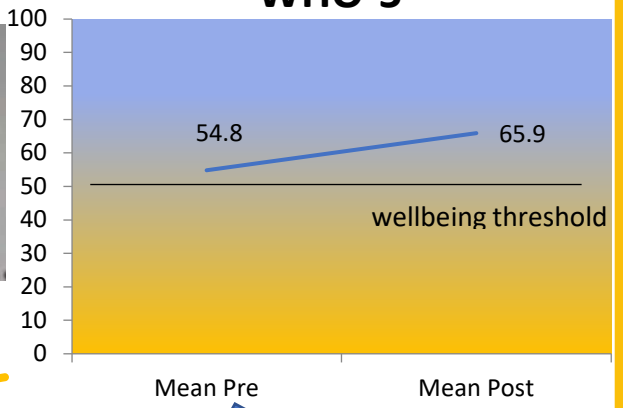
TALK FOR HEALTH

Using the Talk For Health model and framework for sharing experiences & emotions related to service transformation to create a collective vision.



WHO-5



Transformation is often deemed a euphemism for delivering more with less and is at risk of becoming meaningless. Challenging rigid, risk averse system creation.

What did we do?

- Created emotional space to encourage dynamic thinking and engagement in transformation process. Empowerment and voice.
- Fostered shared vision for mental health services and means to influence progress.
- Formed quality bonds between stakeholders, statutory and third-sector. Learn from each other.
- Decompressed and looked after wellbeing.
- Lived (service users and carers) and professional (staff) experience in room together

Summary of outcomes

- Series of short films created to promote collective vision for transformation. Event with key stakeholders.
- Skills developed (relevant to work and personal life)
- Strong links across roles and systems in the area.
- Significant increase in wellbeing (WHO-5)
- High satisfaction score (4.8/5)

CONTACTS
Mike Lawrence
mike@talkforhealth.co.uk
& Cerdic Hall
cerdic.hall@candi.nhs.uk

Next Steps…

- Build capacity of C&I Recovery College to deliver T4H training
- Peer and lived experience workforce development - training skills, communication skills, increased leadership opportunities and skills, supporting potential/actual workers
- Community-based, sustainable and long term mental health solutions via increased access of residents to T4H groups delivered by those with lived experience.