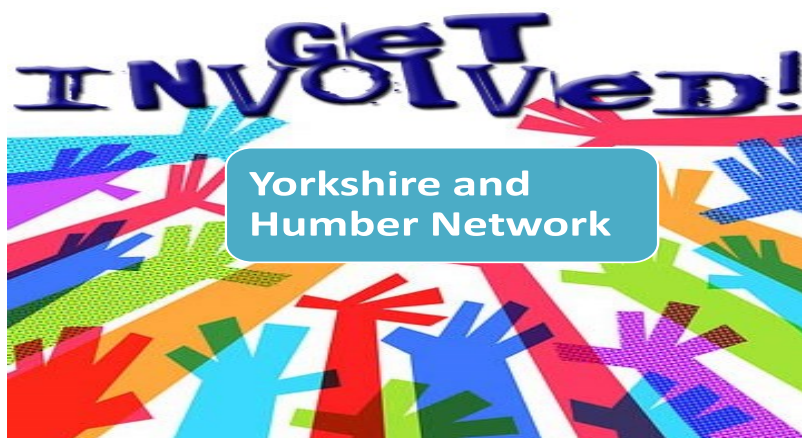


# YORKSHIRE AND HUMBER NEWSLETTER 2



## A little bit about us

### Holly

- Music, laughing, pink
- Mushrooms
- Playing guitar, cooking for friends
- Recently changed surname from Fletcher to Alix (used to be middle name!)

### Likes

### Dislikes

### Interests

### Funny fact

### Jo

- Shopping, Birthdays, sparkle
- Coffee
- Afternoon tea or a cuppa with friends
- Recently changed surname from Wright to Harris (just got married!)

### Role

Meeting with people and hearing about all the work that they are doing

Inspiring people and hearing about new ways to get motivated

Developing ways of improving experience of patients and staff

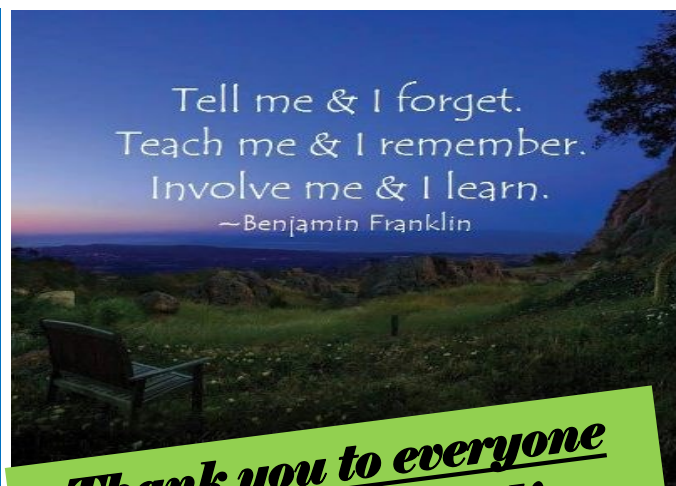
Involving people in this and the bigger picture – strategy

Finding ways to do this which make sense in the real world—not just doing things that are supposed to be right

Having fun and a laugh along the way - the process is more important than the outcome.

## Inside this Issue

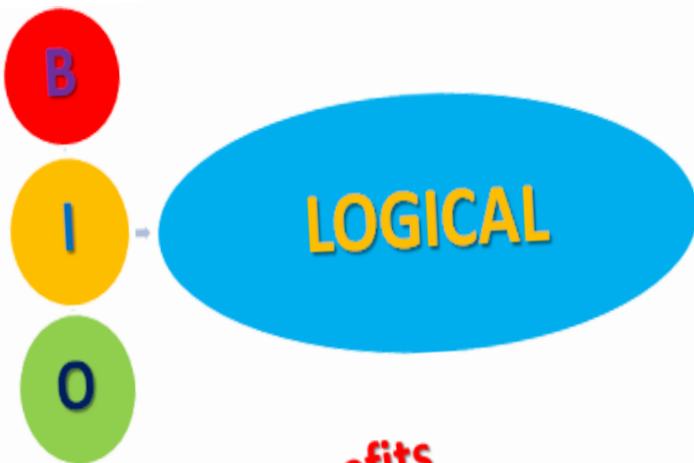
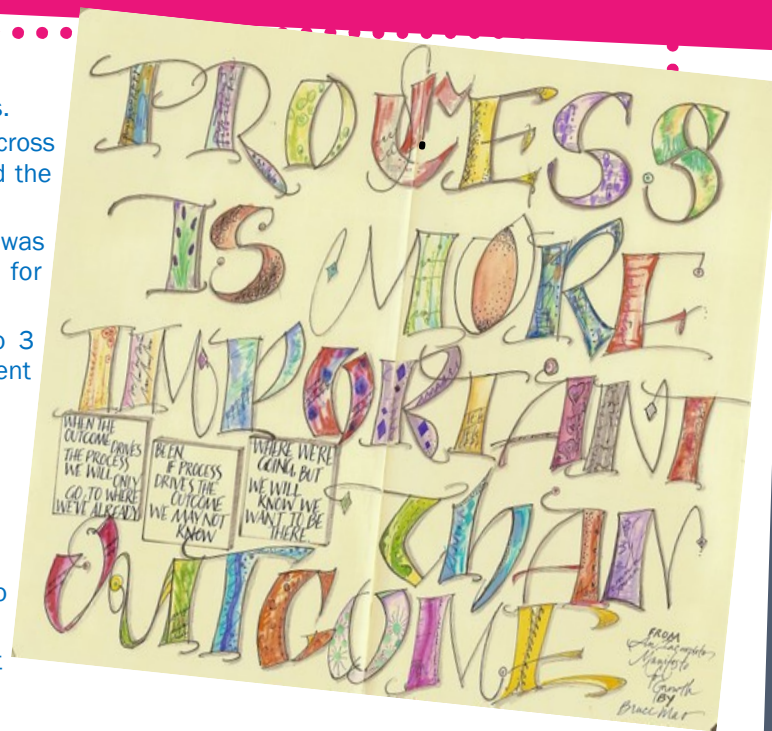
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***Thank you to everyone  
who contributed!***

## Where are we up to?

- We initially met with all the services to find out their priorities.
- We then held workshops with staff and service users across Yorkshire and Humber such as the Afternoon tea event and the Recovery and Outcomes groups to identify further priorities.
- Most priorities for services were joint ones. A preference was expressed for sharing and developing things together, for workshop style learning, and sharing best practice.
- Voting took place to narrow down the joint priorities into 3 project groups, MDT standards, Involvement in Recruitment and Selection, and Reviewing Involvement Structures.
- Each project group met every month over the summer.
- Services prioritised attendance at different project groups.
- There are 2 CQUIN groups meeting bi-monthly.
- The Yorkshire and Humber Network meets every 3 months.
- Some services had individual priorities that we are also supporting them with.
- The three project groups worked to develop a tool/product that could be shared with all services.
- The next phase is the implementation phase.
- We have gone around all the services again to share the product/tool for each project group with them, and identify how they would each like our support with the implementation of these.
- Most of the services expressed an interest in having us come to their Involvement groups on a quarterly basis. With this in mind bookings began and our year ahead is starting to look very busy!
- Alongside attending service Involvement Groups, the CQUIN groups will continue—but with 3 this coming year instead of 2. They will each be held every 2 months.
- The Yorkshire and Humber Network will also continue to meet once a quarter.
- The Benchmarking tool was a product that started out in the Reviewing Involvement Structures project group, and is another piece of work that we will be focussing on over the coming year. This has had input from a lot of different groups and will cover a lot of CQUINs from previous years, ensuring that the good work that went into meeting these targets doesn't get lost. It will cover 10 key areas and has standards for each one. We will support services to benchmark themselves against each area and prioritise areas for development. Services that score highly on the benchmarking tool will then become areas of best practice and will be encouraged to share this work with others. This will be piloted shortly once completed, and then will be rolled out across services, and we will support this process.
- The focus is on supporting the 3 CQUIN's, sharing best practice through the Newsletter and Yorkshire and Humber Network, and on the consolidation of old CQUINs and project groups through the use of the Benchmarking tool. Also through attending service Involvement groups we hope to be able to better reach and engage with more service users who have been unable to attend regional meetings.

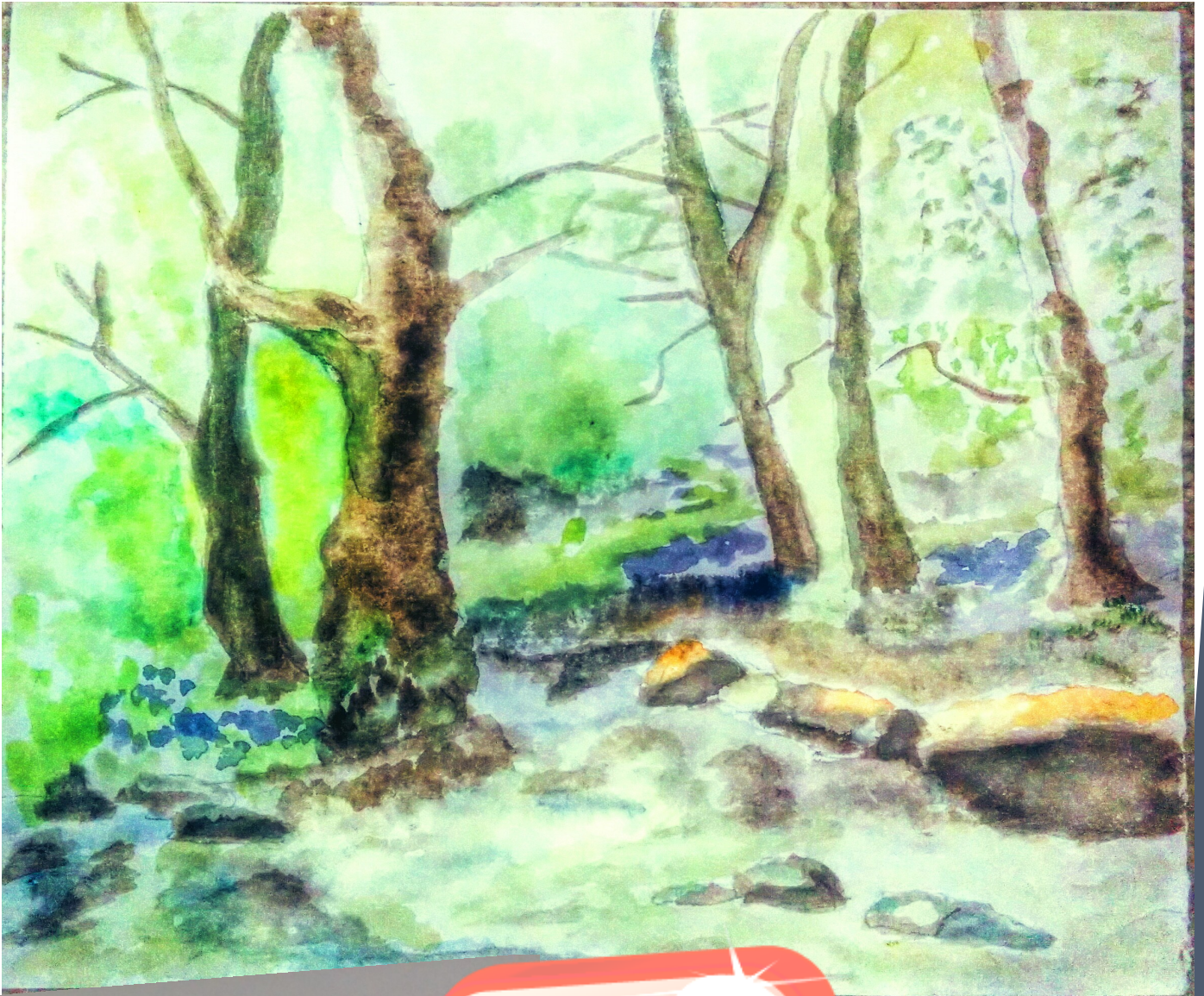


- B – Benefits
- I – Impacts
- O – Outcomes

## Motivation/Inspiration







**Poems and  
artwork from  
Mark at  
Greentrees**

COORDINATION

You can wear nice tops and jeans  
Of cool design and colour schemes  
Made of cotton and soft leather  
But what matters is if they match together

Red and black will never fail  
Nor will blue and white  
And how you look affects how you feel  
So you need to get it right

RELATIONSHIPS

What's your name?  
What's your job?  
What's your game?  
I hope we get on fine  
And don't fall out  
All of the time

Let's take it nice and slow  
You can't rush things you don't know  
Let's pace it out  
And have some fun  
It can take forever  
To know someone.



# The Last Day

Pam sat at the switchboard of the data processing firm listening to the same routine, incoming calls as she had been doing for the last nine years. It was a job, not the best of jobs, but it helped to pay the bills, buy clothing for the kids and pay for the treats she loved to give them. She felt tired today, almost being sent to sleep with boring incoming information about the federal budget, oil process and developments in international relations. Lots of dry words and dry statistics. She yawned, then opened a foil wrapper and took a bite of a sandwich.

It was three in the afternoon, in an hours' time she'd officially finish work and go and pick the kids up from school. Just as she was about to take another bite of the sandwich she heard a voice cackle over the wires, a whispering voice, a rather odd and what seemed a secretive, sort of tone... then she could make out other voices, whispers of some furtive conversation. Pam listened intently, and grew more and more worried at the kinds of things that she felt she was hearing...something about a "critical situation", and avoiding public panic and media access. Pam wondered as to what this supposedly critical situation might be. Then the whispers said something else, almost inaudibly, about a midnight strike, then came a hissing of static and the voice changed...somebody else was speaking now.

And somehow she recognised that voice, had heard it somewhere before, perhaps several times. Who was it? When had she heard it before? Then she knew...on television of course. It was the Presidents voice... unmistakably so. But in contrast to the cheerful tones of televised official broadcasts, this tone was far more guarded, secretive. The voice also seemed to possess an edge of anxiety, as if the President's confidence had been recently compromised by the sorts of things Pam had unofficially been able to hear. There was another buzzing of static and then a voice said something about a total wipe-out, a global future of zero, and something else about radiation. As the voices faded away, the word "midnight" was again repeated.

Pam was bewildered, could no longer continue her sandwich, couldn't find the saliva to eat it, her mouth had dried up. She put on her jacket and left work a quarter of an hour early. As she climbed into her car she forced herself to keep calm, and told herself that the kids mustn't know anything about it, nor her husband, nobody must know, it was too late now, far too late. She was perhaps the only member of the American public, even the world public that knew. Nobody else had been told, deliberately so, for hadn't the whispering of the President's voice spoke of a policy of blocking media access...so nobody had been informed; that was a Pentagon imperative, probably to avoid widespread public hysteria and mass panic if the news about midnight were revealed. Yes it was too late now, much too late. Just less than eight hours away, then the United States would turn to ash, and all its people too...all two hindered million of them. If at this late stage she even attempted to tell anyone it wouldn't tangibly change the face of things, wouldn't reverse the dread that lay only hours away; and nobody would really believe her anyway...they wouldn't take her seriously, just smile sadly at what they would assume was a scaremongering hysterical woman. The confrontation she imagined was no doubt between America and the Middle East and she suddenly felt light headed and dizzy, as if her brain were starved of blood, her hands were shaking and wild thoughts flew around her head like a mass of demented bats...

Mummy can we play out in the garden after tea?" little Louise asked. "Oh yes, please can we mum?" young Neil asked excitedly. "Of course you can", Pam said. "Look", Neil said, "daddy's home already" and pointed to a car coming up the drive.

"What's for tea mummy?" Louise asked. "Whatever you like, it's a special treat because it's a special sort of day", Pam said, feeling a fierce love for her kids and fighting back a dam of a billion tears.

"Can we have ice cream?" Louise asked. "And jelly too?" Neil added.

"Certainly, anything you want and as much as you want" Pam said, determined not to break down in front of those two happy faces that stood before her. As she prepared the children's tea her husband entered the kitchen.

"It's been a tough day" he said, "I don't know what the economy's coming to, all these businesses closing."

"Well you chose a business career", she said smiling.

"Yes I suppose there's no denying that" he said rubbing his tired eyes, "but it's the state of the nation generally, the country".

The country...Pam thought about that. All the people, the pensioners, teenagers, kids, babies, all the millions of buildings, vehicles, parks, fields, industries, airports and so much more, soon to be vaporised. It was six thirty, five and a half hours to go...

But suddenly she ceased to worry, didn't seem to care anymore, didn't feel bitter about political figures or the military, she just looked around the house at her husband and listened to the excited cried of her kids running around outside. It had to happen sometime, had to occur one day, and it just happened to be today. If they blew it all up then so be it, they had never learned from past mistakes and it was far too late to learn now. She still had the evening and all that really mattered was what lay around her now, lovingly accessible, all beautiful. She had put the children to bed and evening gave way to curtains of cool darkness. Her husband was tired after a long day at the office, but they still made love, and then they just lay there talking about their lives. He said her was considering booking a holiday for all of them in October at the Florida Everglades and had been keeping it until now as a surprise.

"The kids will love it" she said, her mouth dry.

Eventually her husband fell asleep and she listened to the sound of his soft breathing. Then she looked across at the bedroom window, it was very dark. She turned her glance towards the bedside clock, it was quarter to twelve. Her thoughts were those of only a fallible, yet a wonderful human being - like most people. The kids were sleeping tight, and she hoped they were dreaming sweet, pleasant dreams of long happy futures that might lie ahead. Her husband's face was very calm, he looked at peace and she leant over and kissed him. The clock showed that it was two minutes to midnight. She glanced once again at the blackness of the bedroom window knowing that soon it would be very bright.

Short story written by Mark (Greentrees)

# Implementing the MDT Standards Bradley Woodlands

## Service User Involvement

Previous way of Working	Current Situation
Nursing update given to Doctor on day of MDT. Verbal reports from other departments given before the service user attends MDT.	Service user and MDT receive reports from each department at least 24 hours before the MDT meeting. Service user able to write their own report.
Clinical discussion before and after meeting with the service user.	Service user attends the whole of their meeting.
Service user asked to wait outside while decisions requiring discussion are made.	Service user involved in decision making.
Actions attached to minutes.	Service user leaves with a copy of the actions/agreements.
Service user given a copy of the MDT minutes before the next MDT meeting.	

## Being at Ease

Previous way of Working	Current Situation
MDT have hot drinks during the meeting. Nothing available for the service users.	Cold drinks available for everyone.
Service users aware of the day of their MDT but not the time or running order.	Time of MDT included as part of service user's weekly activity timetable.
Community activities avoided on MDT days.	Service users able to access the community around their MDT meeting.
Service user can ask for staff to leave for all or part of the meeting.	
Activities available on MDT days	

## Service User Support

Previous way of Working	Current Situation
Service users dropped off and collected from MDT by support workers.	Support workers, working with the service user on the day, accompany them during MDT.
No report written by service user so no support required.	Staff available to help with writing the service user report.
Advocacy available before, during and after MDT meeting.	
Family/carers able to attend MDT	

## Paperwork

- Fits in with My Shared Pathway Outcome Measures.
- All reports Include each of the Outcome Headers
- Trialling a new format for the service user report with tailored questions .

## Preconceptions

- By speaking openly in front of a service user may damage the therapeutic relationship.
- Service users would not be able to cope with hearing about their risks or other sensitive information.
- Service users would throw the drinks if they became upset.
- MDT would take longer with the service user there for the whole meeting.

## Actual effects so far.

- No relationships damaged to date.
- No increase in incidents during or after MDT.
- No drinks thrown!
- MDT is running on time more frequently than before.
- Patients appear to have a better understanding of actions/agreements made.
- MDT does not appear to dominate the day for the patients being seen.



# Me and my M.D.T.

A presentation on How our ward rounds are run and our input towards them.

## What happens prior to ward round.

- ▶ We have a member of the O.T. Department usually come up prior to the ward round, to hand out self evaluation sheets.
- ▶ These sheets ask how you have been feeling, what has gone well for you, what was not so good and what could I have done differently, and the main one LEAVE.
- ▶ If you feel like you want it some staff will support you with filling it in

## What happens in my ward round

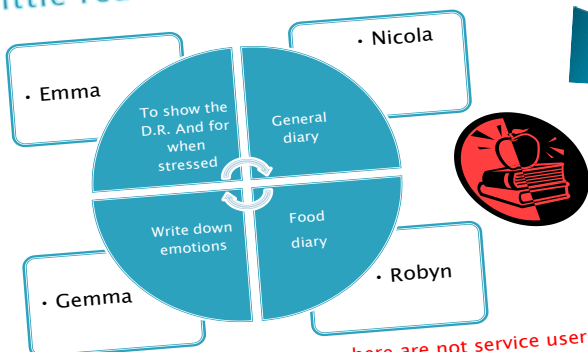
- ▶ The M.D.T. Will ask you how you are doing, and feeling.
- ▶ Each professional will give their report on how you have interacted with them and others over the past fortnight.
- ▶ After each professional has given their report you can ask questions, or state your views.
- ▶ You are then asked to do a honest self risk assessment, staff will then give their views.
- ▶ Based on this we collaboratively discuss any further issues and requests that you have made.

The only time a service user wont be present for the entire ward round is if there Has been an issue with another service user, or if the information is deemed sensitive

## How leave request are made

- ▶ There are a few things that get taken into consideration before leave is granted they are,
- ▶ What is the purpose of the leave.
- ▶ How will it benefit your recovery
- ▶ Will it help you in the future.
- ▶ Is it positive
- ▶ With all this there could still be a chance of leave being suspended due to concerning issues, or deterioration in mental state.

## Our little red books and there uses.



The names shown here are not service users

## Getting prepared for Ward round

- ▶ If you want a member of staff to come in with you, you can request this, in morning meeting they usually can facilitate this.
- ▶ Most weeks we have a sheet of paper stating the order. Although as of lately we have been deciding our own. Surprisingly there has been no arguments yet. Like anything you wont know unless you trial these things.

## Documentation in ward round

- ▶ We will discuss the relevant care plans and change them if necessary.
- ▶ If alterations are made to care plans or leave this will then be printed off there and then with the patient to sign. Copies are then offered to service user and filed.
- ▶ If observations are changed at the end of the ward round, then the nurse will then inform the appropriate people on shift.
- ▶ Any changes made in ward round will be communicated to the next team in handover.

## Service user comments



## About our little red books

A previous D.R. Came up with an idea about trying out a new way to communicate and keep a log of things. This was the little red books, we was all given one of these. Not all patients used them, but some of the ones who has, have personalised and designed them to their style. These can be taken into ward round for the D.R. To read. Also other patients have used them for their own individual needs.

Alpha hospital a state of mind

This presentation was presented by Sarah Williams and Janice woodliffe. Alpha hospital Sheffield. Thank you for your time

with thanks to Chloe lily (nurse)for helping with this





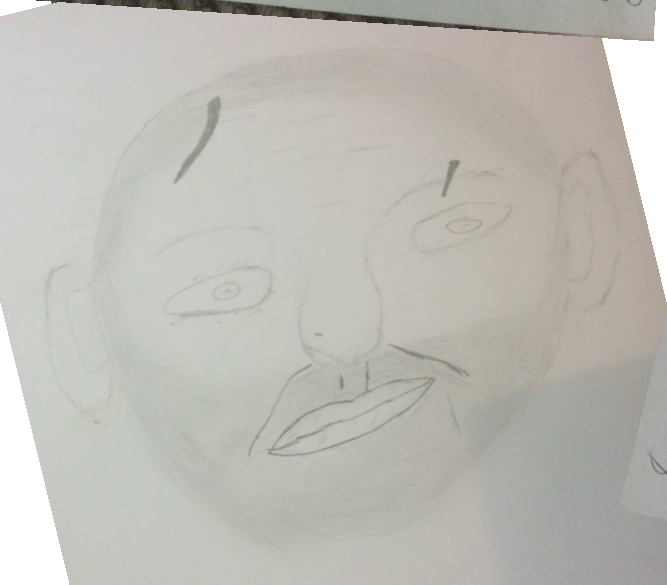
**Artwork from a  
service user at  
Clifton House,  
York**







**Artwork from  
Bob at  
Moorlands View**

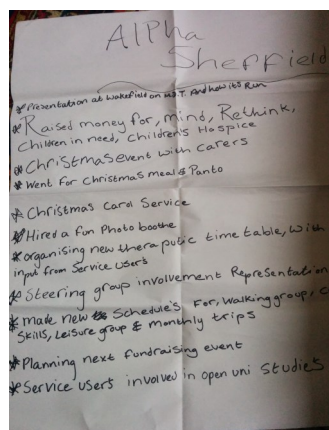


# Y & H Network Round Robin

A new feature of the Yorkshire and Humber Network meetings is the Round Robin. Towards the end of the meeting everyone gets their lunch and then we go round and get a quick update from all the services present about the things they have been up to since the last meeting. This is a good way to share information, best practice, and shout about the things that you are proud of and to ask for any information or support with anything you are working on. Also a great way for everyone to get ideas and suggestions for future presentations too! We thought it would be great to put all this information in this newsletter, to share all the great work that is happening in Yorkshire and Humber.

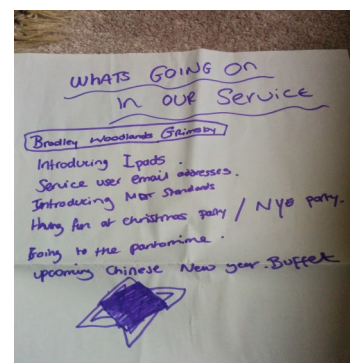
## Alpha Sheffield

Presentation at Wakefield on MDT and how it is run  
 Raised money for charity – Mind, Rethink, Children in Need, Children's Hospice  
 Christmas event with carers  
 Went for Christmas meal and Panto  
 Christmas Carol service  
 Hired a fun photo booth  
 Organising new therapeutic timetable with input from service users  
 Steering group involvement representation  
 Made new schedules for walking group, community skills, leisure group and monthly trips  
 Planning next fundraising event  
 Service users involved in open University studies



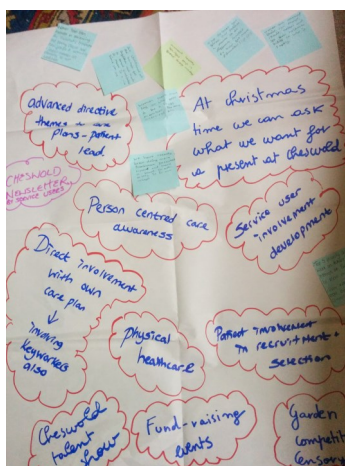
## Bradley Woodlands

Introducing iPads  
 Service user email addresses  
 Introducing MDT standards  
 Having fun at Christmas and New Year parties  
 Going to the Pantomime  
 Upcoming Chinese New Year buffet



## Garrow House

Top 5 priority areas to work on where the women can be more involved  
 Women more involved in Clinical Governance  
 Women have more say on who gets to be a staff member by doing interviews etc.  
 Women have been involved in reviewing therapeutic timetable and having choice over groups and activities. Several women planning to run workshops.  
 At Christmas all the women get together and make a Christmas timetable to make it a nice time for us.  
 Women's healthy lifestyle drop in group weekly  
 We have recently been doing more involvement focussed work and have a board to advertise it all in our lounge.  
 The Retreat have given our women a chance to do different courses help get more education/life skills through their Recovery College.  
 Women are allowed their own phones, iPad, laptops and it is their responsibility to use it safely.



## Cheswold Park

Newsletter by service users  
 Person centred care awareness  
 Direct involvement with own care plan – involving care workers also  
 Physical healthcare  
 Advanced directive themes to care plans – patient led  
 Cheswold talent show  
 Fundraising events  
 Garden competition – sensory garden  
 Service user involvement development  
 At Christmas time we can ask for what we want for a present



## Cygnets

Service User Involvement in planning induction training day

Presentations at Universities and colleges

Ward expectations – collaborative effort

Service user awards

New format service user evaluation strategy

Joint Christmas concert (between 3 hospitals)

Charity events

Music festival

Pop up shops (ASDA)

Visitors local procedure

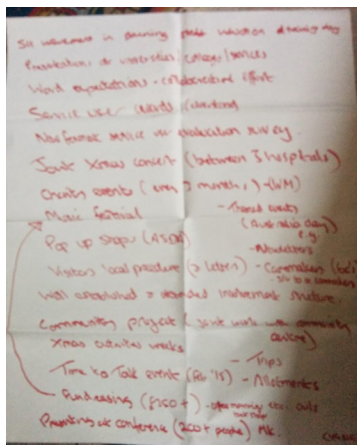
Community project – work with community centre

Time to Talk event

Fundraising, coffee mornings, tuck shops etc.

Presenting at Conferences

Allotments



## Newton Lodge

We have a professional dance teacher teaching Zumba on a Monday afternoon

The Koestler Trust

Service User involvement in interviews

College access courses

We have a plot to grow veg & fruit

Macmillan coffee morning

Outings with Women's group

LodgeFest – BBQ, games, sales, tournaments, music etc.

We have a cottage in Whitby

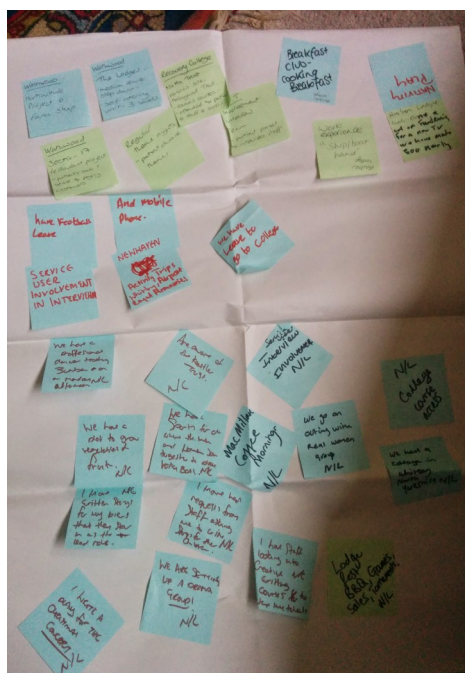
We have sports for all when the men and women get together to play volleyball.

I am looking into creative writing courses to further my talents

We are setting up a drama group

I have written stories for my friends that they star in as the lead roles

I wrote a play for the Christmas concert



## Newhaven

Service users involved in interviews

Football leave

Mobile phones

Leave to go to college

Activity trips, Whitby, airport, Royal Armouries

## Moorlands View

Spirituality group led by consultant

Bingo and quiz's on the ward

Service user jobs – librarian, stock keeping, car valeting, kitchen

Service user interview panels – equal say as professional panel

Community Groups – badminton, walking groups, gym, swimming, cycling

Meals out

Collaborative risk

assessments

Mind your Mind

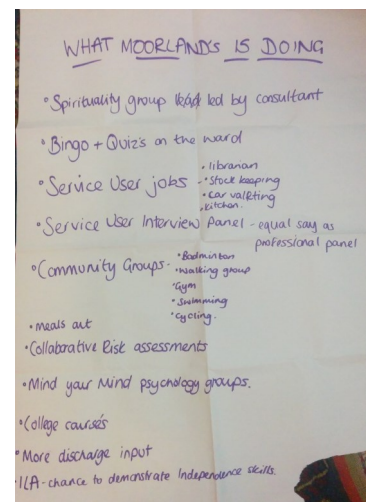
Psychology groups

College courses

More discharge input

ILA – Demonstrate

independence skills



## Wathwood

Horticulture project and farm shop

The Lodges – medium secure step down – self catering unit. 3 levels

Recovery College – Nottinghamshire Trust – various sites throughout the trust, different courses. Attended by patients, staff and carers  
Regular theme nights – patients choose the theme

## Amber Lodge

Breakfast club – cooking breakfast

Work experience – “ship/boat hand”

Nativity play

Fundraising events - lots of different ones for a new TV.

Nearly made £500



A large, colorful network diagram with many nodes and connecting lines, forming a semi-circular shape at the top and a larger, more complex shape below. The nodes are in various colors like blue, green, red, purple, and orange.

# YORKSHIRE AND HUMBER NETWORK

Thursday 16<sup>th</sup> April

Thursday 30<sup>th</sup> July

Tuesday 13<sup>th</sup> October

Sandal Rugby Club Wakefield

10.30 – 1

Lunch and refreshments provided





# Yorkshire and Humber Newsletter

*We need you!*

**Do you like....**

**Writing articles?**

**Poetry?**

**Creative Writing?**

**Artwork?**

Please note we will say in the newsletter who sent it in, (first name and service) so if you would rather it was put in anonymously then please let us know.



We would love to hear from you!

We are Holly and Jo, we work as Involvement Leads across all the secure services in Yorkshire and Humber and we want to produce a newsletter so that everyone can share these things with each other.

It will be a great way to find out about what is happening in other hospitals, as well as sharing your work with others.

You can ask a member of staff to send things to us, or you can send them direct if you have access to email on

[holly.alix@nhs.net](mailto:holly.alix@nhs.net)