

South Yorkshire and Bassetlaw Provider Collaborative Newsletter 1



Date of next meeting:
27 February 2020
Time 2pm - 4pm
Venue: The Earl of Doncaster Hotel

This was the first meeting of the South Yorkshire and Bassetlaw Provider Collaborative bringing service users and staff together from all of the secure services in this area, which can be found below. This newsletter provides all the information from the meeting and then finishes with an explanation of the role of the Involvement Network and the engagement plan between the Network and South Yorkshire and Bassetlaw Provider Collaborative.

We started the meeting with a presentation from Jason and Vinaya. The information from this presentation is on pages 2 & 3. We then did some group work. See your feedback on pages 4-6.

We spent some time thinking about the purpose of the group and what everyone wants to get from these meetings going forward. This has formed our Terms of Reference and can be found on page 7-9. We also want to share the engagement plan between the Involvement Network and South Yorkshire and Bassetlaw and this as well as the accompanying Communication Plan can be found on pages 10-11.

Thanks to everyone for all your hard work and contributions!

Services	Forest Lodge
Cheswold Park	Wathwood
Cygnets	Amber Lodge &
Sheffield	RDASH

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Venue: The Earl of Doncaster Hotel— Concorde Suite
 Thursday 28th November
 2-4pm

Refreshments provided

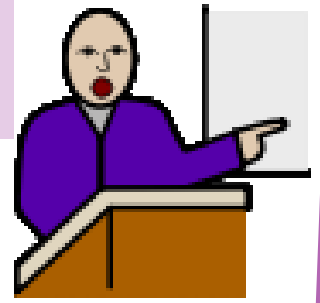
South Yorkshire and Bassetlaw Engagement Event Agenda

- Welcome—Introductions**
- Introduction & Update**
 Provider Collaborative
 Jason / Vinaya
- Group Work 1**
 Finding solutions to engagement issues
- Group Work 2**
 Coproducing the Pathway
- Terms of Reference**
 Purpose, membership, frequency, governance and key priorities

Contact Holly or Jo for more information
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Collaboration. Hope. Encouragement. Empowerment. Respect. Support. Fun

Introduction and Update



Adult Secure Care services

South Yorkshire & Bassetlaw
Provider Collaborative

28th Nov 2019



National Context:

- National Bench Marking exercise carried out based on data collected for 2015/2016
- Inpatients
 - Low secure – 2,810
 - Medium secure – 2,701
 - Total – 5,511
 - (Some LD / rehab / outside scope patients)

Patients on community caseload

- Patients on community forensic caseloads at 31/3/2016 = 4,514
- Discharges from community teams – 4,707



BENCHMARKING DATA HIGHLIGHTED:

- Lower length of stay was linked to community service provision.
- Many service users are cared for in services far away from their home areas.
- The women's pathway is different and requires attention.
- Black men are over-represented, but seldom heard through conventional routes.
- Widespread variation in the clinical offer across the country.



This led to development of :

- Provider Collaboratives (New Care Models)
- Black voices initiative
- Community Forensic Services
- National Strategy for women in Secure Health Care- Prototypes developed
- Peer mentoring projects



MAIN MESSAGES:

- Service users feel “stuck” in services
- Not enough support around discharge is provided
- Help is needed with practical issues eg registering with a GP, housing support, benefits advice
- Roles such as support workers & peer support workers would help
- More support for carers required
- The support and services available need to work jointly



5 WORKSTREAMS:



Working together to improve care and experiences

The Partnership

	Cheswold Park Hospital	94
	Cygnets Sheffield	15
	Nottinghamshire Healthcare FT	76
	Rotherham, Doncaster and South Humber FT	13
	Sheffield Health & Social Care FT (Lead Provider)	22
Total		220



Working together to improve care and experiences

Agreed to establish a formal Provider Collaborative Partnership.

To work together to

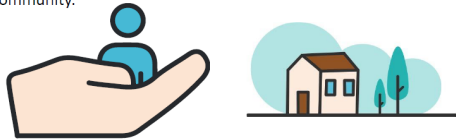
- Deliver great inpatient care
- Ensure care is available locally
- Time in a secure setting is kept to the minimum required by the individual
- Invest in and build improved community services and support



Shared aims

To provide high quality forensic care that supports recovery, is community focussed, delivered in the least restrictive setting and as close to home as possible.

By doing this we will reduce the amount of care provided by secure hospitals lives and support people to lead successful lives in their local community.

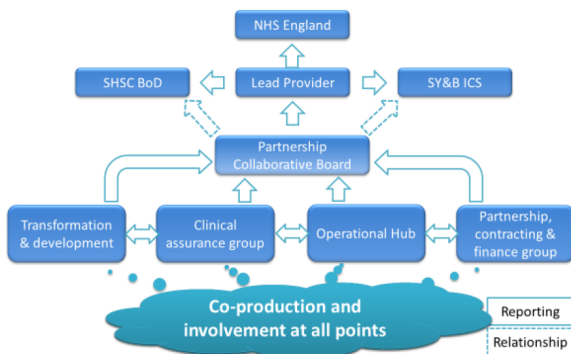


Our Development Plan

1. Delivering joined up care and care pathways
2. Effective Single Point of Access & bed management process
3. Develop Community Forensic Mental Health Services
4. Develop Community Forensic Learning Disability Services
5. Improve community living services – accommodation, supported accommodation, community support services
6. Ensure we have the right number and types of beds available to provide local care

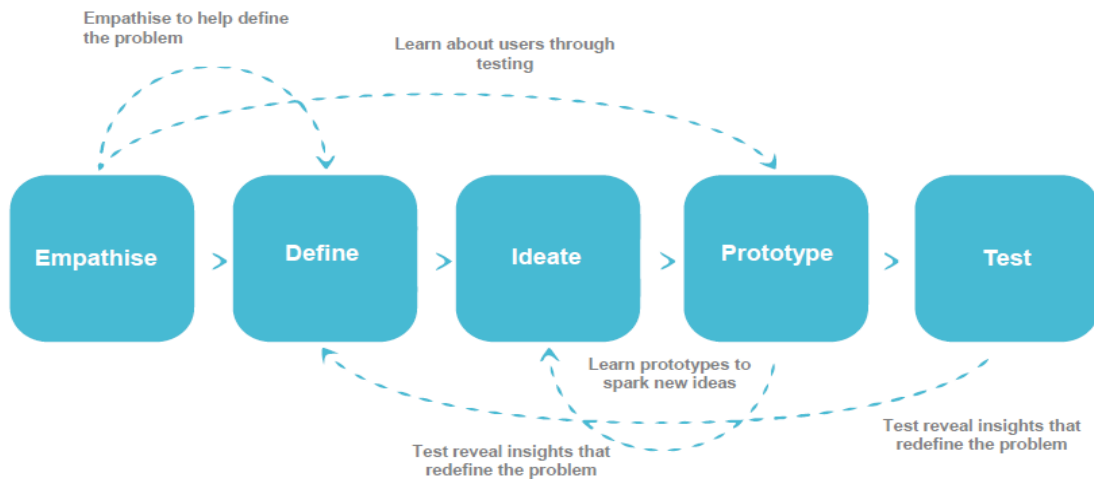


Governance – quality and operational



Group Work 1 - Co-producing the pathway

DESIGN THINKING



Collaboration. Hope. Encouragement. Empowerment. Respect. Support. Fun

Group Work 2 - Finding solutions to engagement issues

Group work 2

Finding solutions to engagement issues:

What are the barriers?

How could we get better at this?

How would you want to influence change?

What help and support would you require?



What are the barriers?

- * Too much information at one time
- * Some may find it boring
- * Can be daunting being in a big group
- * Understanding and communication
- * Lack of knowledge
- * Reluctance to engage
- * Been in hospital a long time – might not want to travel
- * Too long on essay, for service user to read and comprehend.
- * Some may worry they won't understand
- * “Didn't have a clue” – service user
- * Low staffing
- * Some may not want to travel far
- * Not enough staff
- * No leave, being able to release staff

How could we get better at this?

- * More group sessions
- * More community sessions
- * Come and visit service users directly
- * Support for staff members
- * Clearer communication with detail
- * More notice
- * Involvement lead
- * Keep motivation up!
- * Easy read
- * Clearer communication
- * More interaction
- * Base group around the service user
- * More one to one sessions
- * Having something more local
- * Easy information to read
- * Provide training
- * Hire more staff
- * More staff involved
- * Email questionnaire
- * Less formal meetings
- * Pictorial
- * Handouts for presentation
- * Aim towards the service users
- * Invite to planning meetings

How could we get better at this? continued

- * Respect their individuality, i.e. dyslexia
- * More trust between staff and patients
- * Less talking - lost interest in the first 5 minutes
- * Have patients and staff to lead on each unit
- * Patients trained and informed for events and agendas
- * Use of technology – virtual conference/meeting – Skype
- * Meeting other patients that have had similar experiences to see different pathways
- * More staff to understand, to pass information on to patients who may not be able to attend
- * Fictional characters used that they recognise

How would you want to influence change?

- * Sharing experiences with people – inspirations and hope
- * Interview panels
- * Peer support work
- * Patients plan and development of new service
- * Awareness of realistic goals for people
- * Have more of a voice
- * MDT

What help and support would you require?

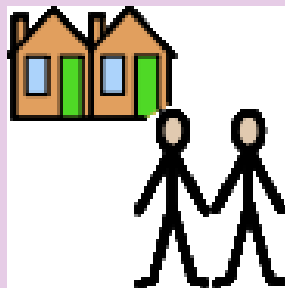
- * Regular ward meetings
- * Find out more about other hospitals
- * Find out about restrictions that are in place and why
- * How we can reduce hospital stay for everyone
- * Make our voices heard
- * Managers input to help make changes
- * People to help us understand the process
- * Share information
- * Moral support
- * Co-producing the pathway
- * Housing and accommodation
- * More information about money after leaving hospital
- * Better support after discharge
- * Manage money in services
- * Training – patients training in certain situations with other patients



Group Work 3 - Terms of Reference

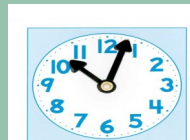
Key priorities to talk about

- * Patient care
- * What's working and what's not working
- * Updates
- * Funding
- * Accessing the right help
- * Clear pathway – prior to discharge
- * How to reduce length of stay
- * Moving patients closer to home
- * How things are progressing
- * Update about hospitals
- * After care booklet – including practical everyday events, ie money, bank accounts, benefits, electric, gas, water, TV licence



How should they run?

- * No longer than 2 hours
- * Be held at different sites
- * Mixing with other patients to share each other's ideas and views
- * Not very long presentations
- * Ice breaker fun activities
- * Honesty – from us and them without judgement from people
- * Changing each hospital to do meetings



How often should the meetings happen?

- * Once a month
- * Quarterly
- * Every two to three months
- * Every four months



Who should attend?

- * At least one patient from each ward
- * More staff should come and more patients
- * Involvement person for each ward
- * Patients
- * Option for family member
- * People who have mental health problems
- * Family and carers
- * Anyone – mix of staff
- * Directors
- * Ward managers
- * OT to take lead
- * Carers
- * Case managers
- * Doctors
- * Ward staff
- * Staff and patients

How should it feed into other meetings?

Newsletter
Leaflet
Posters
Email



Group Work 3 - Terms of Reference

PURPOSE OF THE GROUP

To share ideas

Plan future vision and working practices

Find out what is happening with plans and updates

Find solutions to issues and sticking points from service user and staff point of view

Have our say

MEMBERSHIP

Service users

Staff from across secure services

Carers, family and friends

NHS England and NHS Improvement

Open meetings to people and services across the whole pathway

WAYS OF WORKING

Talk about best practice and learn from each other

Share ideas and implement ideas in each service

Newsletter to be produced and circulated each time

Take information back to services and let people know what we have talked about

Feed information back to the partnership board—2 way process

FREQUENCY OF MEETINGS

Quarterly—every 3 months



Engagement Plan - South Yorkshire and Bassetlaw

Engagement Plan – South Yorkshire and Bassetlaw

The Yorkshire & Humber Involvement Network has been in existence in its current form since January 2014. There has been lots of proactive involvement with solution focussed workshops working on developments and improvements to current secure services, and involvement and direction from service users and staff to the way future services should be shaped and commissioned. The Involvement Network has a 5 year strategy called From Functional to Fabulous, with a vision, mission statement and values that we work towards. Each service has an individual engagement plan which focusses the interface with the Network. The Involvement Network has produced a SeQuIn (Secure Quality Involvement) Benchmarking Tool which will be launched in September 2019. This tool has been developed, reviewed and piloted through processes regionally and in the services by Service Users and Staff and with support of Manchester University and University of Central Lancashire. Services across South Yorkshire and Bassetlaw as well as across Yorkshire and Humber will input their data on a web portal, allowing us to Benchmark ourselves against other services on 12 key areas of Involvement. This will be completed collaboratively with Service Users and Staff. This Tool aims to show that if a service scores well on the different areas of the tool, than this shows that the service has good outcomes in these areas of Involvement.

The following describes the Involvement of South Yorkshire and Bassetlaw with the Involvement Network to date around this work.

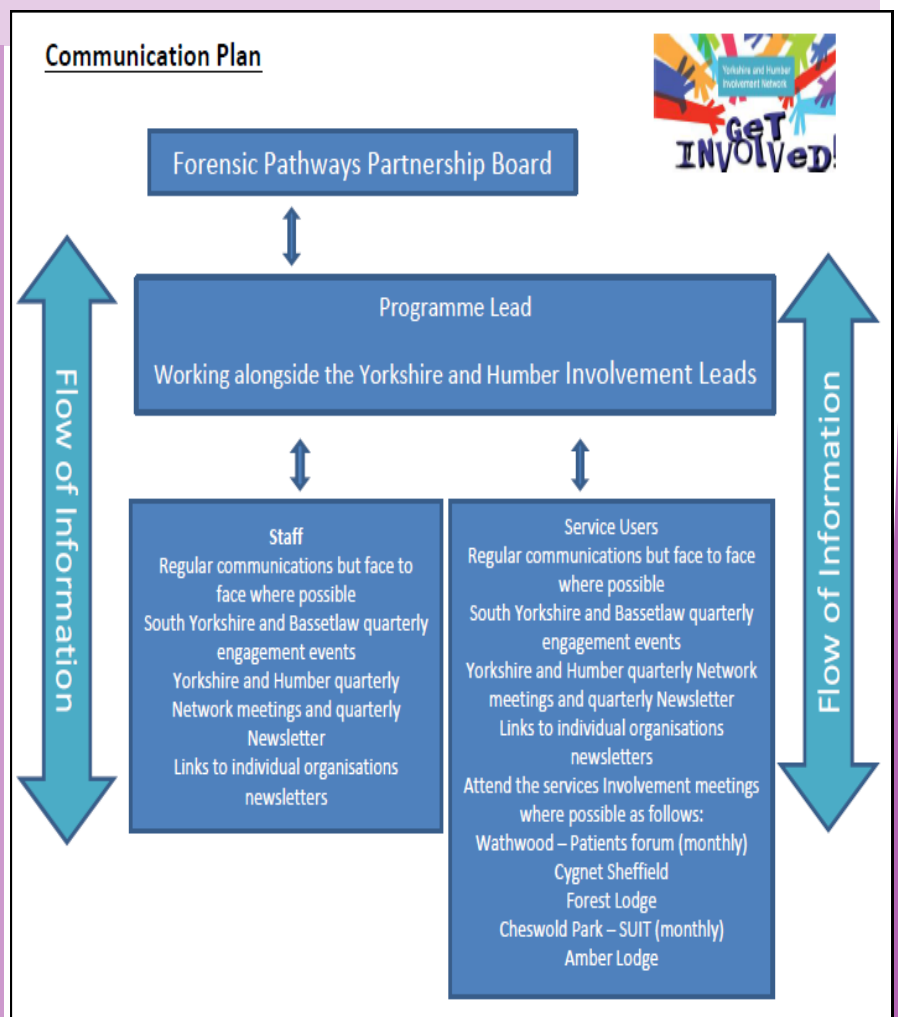
- Engagement across Yorkshire and Humber that South Yorkshire and Bassetlaw accessed and contributed to:
 - Two whole day interactive workshops around the pathway have been held with service users and front line staff
 - Ongoing discussions at the quarterly Involvement Network meeting which aims to share good practice and learning across services, individual pathways and focussed group work.
 - The Mental Health Service Review CQUIN was developed through the Network and then all services worked on mapping and developing an innovative project across agencies which was coproduced and jointly reported on. Quarterly meetings were held throughout the year to develop these links and share ideas and be creative in finding new ways of working. They produced a direction of travel in the ways that services should be provided and commissioned, and different work-streams were run to discuss, debate and find a way forward. South Yorkshire and Bassetlaw were at the forefront of the work, with leadership of the work-streams coming from this footprint.
- Specific engagement with South Yorkshire and Bassetlaw
 - Workshops are currently being carried out across the services in South Yorkshire and Bassetlaw to feed into the Provider Collaborative work going forward looking at 3 main areas:
 1. Involvement of service users who have recently been admitted to hospital to find out what happened to lead to their admission.
 2. Involvement of service users who have been recently discharged to understand what has been useful in their pathway.
 3. Involvement of carers, families and friends at existing service provider forums to hear their experiences of the services.
 - These workshops are taking place at Wathwood, Cheswold Park, Forest Lodge, Cygnet Sheffield and Amber Lodge

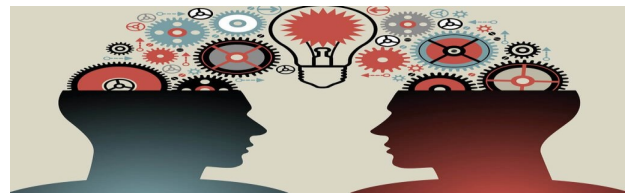
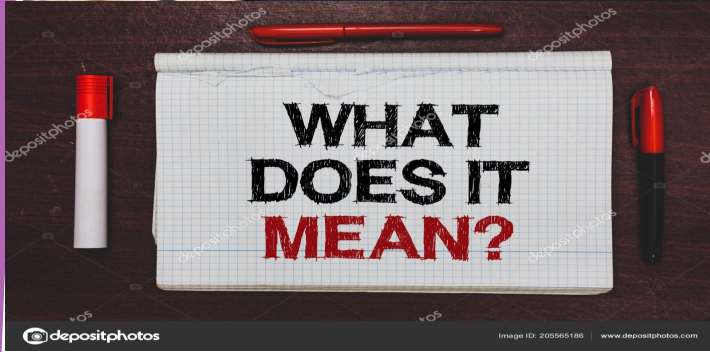
Our aims and goals going forward:

The Yorkshire and Humber Involvement Network is facilitated by 2 Regional Involvement Leads and each of the 3 Provider Collaboratives are part of that Network. There is a proposal to increase this to 3 Involvement Leads across Yorkshire & Humber. This would mean that each Provider Collaborative would be supported by 1 WTE Involvement Lead. This would extend the Involvement Networks from solely being in-patient secure mental health settings to covering the whole pathway, including service users and agencies along that pathway. Therefore discussions about each STP footprint in Yorkshire & Humber funding 1 Involvement Lead needs to be had in order to progress all of the following plans.

- Continue to be involved in and access the wider Yorkshire and Humber Network events such as the CQUIN meetings and Network meetings as well as any relevant Project Groups
- Once the SeQuIn Tool has launched in September 2019 services will commit to taking part in completing this in a collaborative way and using this to Benchmark good quality Involvement in the 12 key areas over the year starting from January 2020.
- We aim to develop this Involvement Network specifically in South Yorkshire and Bassetlaw that meets on a regular basis to ensure that work is joined up and that this then feeds in to the Partnership Board in a meaningful way. A regular workshop bringing Service Users and Staff from all these services together to agree the Terms of Reference for the Service User and Staff Engagement Strategy, to feedback and get input into the work as it is progressing, and to look at how best to work together within this footprint, ensuring that everyone has opportunities to get involved.
- Include workshops with external agencies throughout the whole pathway in South Yorkshire and Bassetlaw which include housing, local authorities, third sector organisations, CCGs, prisons, education and employment etc.
- Look at the interface between secure CAMHS and adult secure services to see what can prevent stepping up into adult services.

- Develop involvement networks inclusive to service users and staff from all these agencies to be able to better improve the whole pathway through coproduced plans and implementing improvement and progression of solutions.
- Develop involvement networks for Carers.
- Develop Peer Support roles and opportunities that can work across the secure care pathway, providing clear opportunities for Service Users who have experienced Secure Care, particularly around supporting discharge into the community.
- Involve and engage with service users in pathways out of area to be able to improve their pathways and experiences of care, and be able to commission services which meet their needs closer to home if required.





South Yorkshire & Bassetlaw

The country has been split in to geographical areas. This is the area of the country that you are getting care and treatment in at the moment. If you are from this area originally then you should be able to have care and treatment here.

Provider Collaborative / STP / ICS

The 5 secure services in this area of the country are the Wathwood, Forest Lodge, Cygnet Sheffield, Amber Lodge & Cheswold Park. This simply means that these services are working together to help people get out of hospital quicker and get better community support.

Fragmentation

This means that the care that is currently provided to people is not provided in the right way, so these changes need to address this.

Transformation/ New Care Models

This means that there is a lot of work happening to change services to make them better, to make sure that people can be treated in their home area where possible, and to make sure that everyone has got a clear pathway out of hospital and back in to the community.

Out of Area

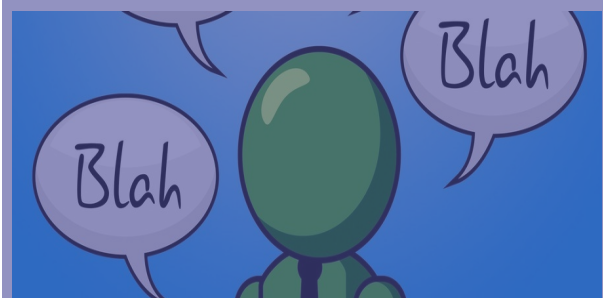
If you are from South Yorkshire & Bassetlaw originally then you should be able to have care and treatment in this area. If you have to go somewhere else in the country to get the right care and treatment then you will be classed as being Out of Area. Sometimes this is what people want, but if not then you should be able to come back to your own area for care and treatment.

Lead Provider

In each Provider Collaborative or STP one of the services takes the role of Lead Provider—this means that they are responsible for making sure everything happens and will lead on funding in the future. This is the Sheffield Health & Social Care Trust for your area, and is always an NHS provider.

5 Year Forward View

The NHS plan for Mental Health Services





Engagement Event for Service Users and Staff from Secure Services in South Yorkshire and Bassetlaw

Thursday 27th February – 2-4pm

Venue – The Earl Of Doncaster Hotel, DN2 6AD

Refreshments provided

Find out about what has happened so far, what is happening now, plans for the future, and have your say!



Contact Holly or Jo for more information

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www.yorkshireandhumberinvolvementnetwork.nhs.uk