

# Humber Coast and Vale Provider Collaborative Newsletter 4



**Date of next meeting:**  
**12th May 2021**  
**Time 2-3**  
**Venue: Virtual event!**

Thank you to everyone who joined us for our second virtual get together in Humber Coast and Vale!

In this Newsletter we will feature the slides from the event in March 2021 about what you can expect from your community team while you are in hospital.

You can see the conversations that we had around how to best engage with families, friends and carers. We continued to talk about the importance of the language that we use so that it is accessible to everyone so this is included. We had a few updates from what is happening—you can find these in the newsletter too. You can also see a poster for the next meeting and a feedback form to help us improve.

It was lovely to see so many of you and hear all your views. The next meeting will focus on how we can communicate with you better around Access Assessments, we hope to see you all there!



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**Humber Coast and Vale Engagement Event Agenda**

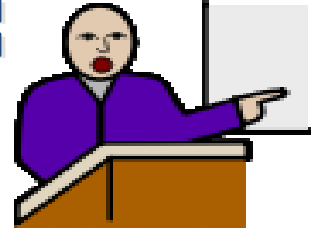
- Microsoft Teams**  
Wednesday 10th March 2 – 3.30
- Welcome**  
- Introductions
- Community Teams**  
What does it mean for me?  
- David Harvey
- Engaging with families / carers**
- Jargon Buster**
- Next meeting:**  
12th May 2pm  
Access assessments  
Inequalities

Contact Holly, Jo or Charlotte for more information:

[Hnf-tr.involvement.network@nhs.net](mailto:Hnf-tr.involvement.network@nhs.net)

[www.yorkshireandhumberinvolvementnetwork.nhs.uk](http://www.yorkshireandhumberinvolvementnetwork.nhs.uk)

# Community Teams: David Harvey



So we think everyone should know who their community worker is and know what you need to do to move on from hospital and to have met with them whilst still in hospital.

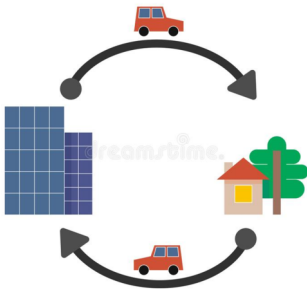


## Community teams in Humber, Coast and Vale

Humber Coast and Vale Provider Collaborative

David Harvey

Clinical Lead and Consultant Psychologist



### Remember...

- Not all community teams across the country are the same
- I am from Humber Coast and Vale
  - York and North Yorkshire
  - North Lincolnshire
  - North East Lincolnshire
  - Hull
  - East Riding
- If I ask for your name today let's use first names only – no surnames required

So if you haven't met with your community worker, then shout up (see next slide).

David - There needs to be closer working between yourself, your MDT and your community worker. But it takes different amounts of time for different people. We need to make sure everything is in place to support you and then hopefully your pathway will be smoother and you will be able to move on.

Nikki (from community team) – We have started a big in reach in to visiting people in hospitals in HCV to meet with you, say hi, and to support you by finding out where you are in your pathway and what you need to do to move on into the community

### 1. Raise your hand if you know who your community worker is...

**Yes I do**

- Reagan
- John
- Paul

**No, I don't**

- Daniel
- Lewis
- Mention of advocacy



### 2. Raise your hand if you have had contact with your community worker in the last three months....

**Yes I have had contact**

- Reagan
- John
- Paul

**No, I haven't had contact**

- Daniel - contact with case manager and probation
- Lewis
- Unsure who they are



We want, from a commissioning perspective, for community workers to come to your MDT meetings so you can have conversations to plan your pathway into the community

### 3. Raise your hand if your community worker has attended your MDT meeting

**Yes they have**

- Reagan
- John
- Paul

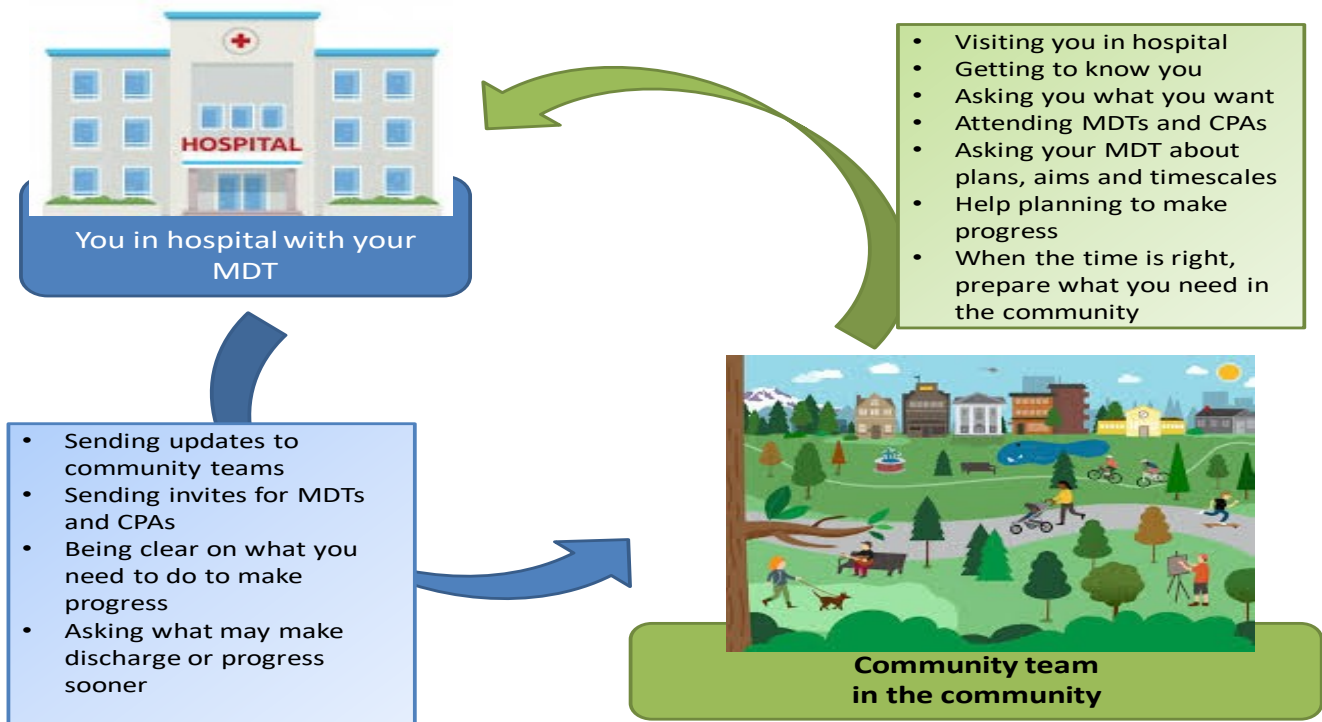
**No, they haven't**

- Lewis
- Daniels case manager has attended

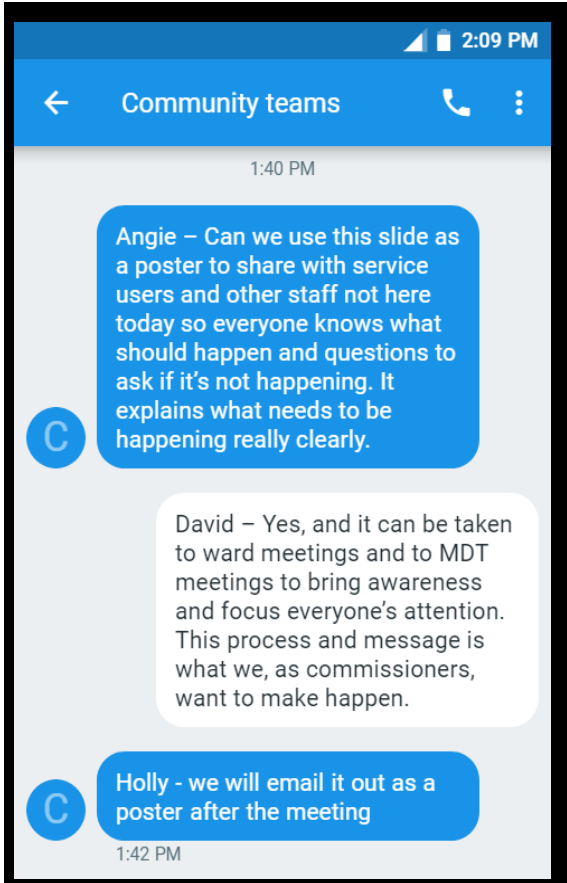


Service user perspective – It can all take too long. What do I have to do to get back out into the community. It takes forever

It was agreed that we should repeat this exercise again in the future to see if the numbers of people in each category change so there are more yes's. This can be done before the meeting too, so people not at the meeting can have their points of view heard as well.



Nikki – We, as the community team, need to get ourselves around more. Please get in touch to hear more about the community team and how we can help you.



### If none of this is happening...

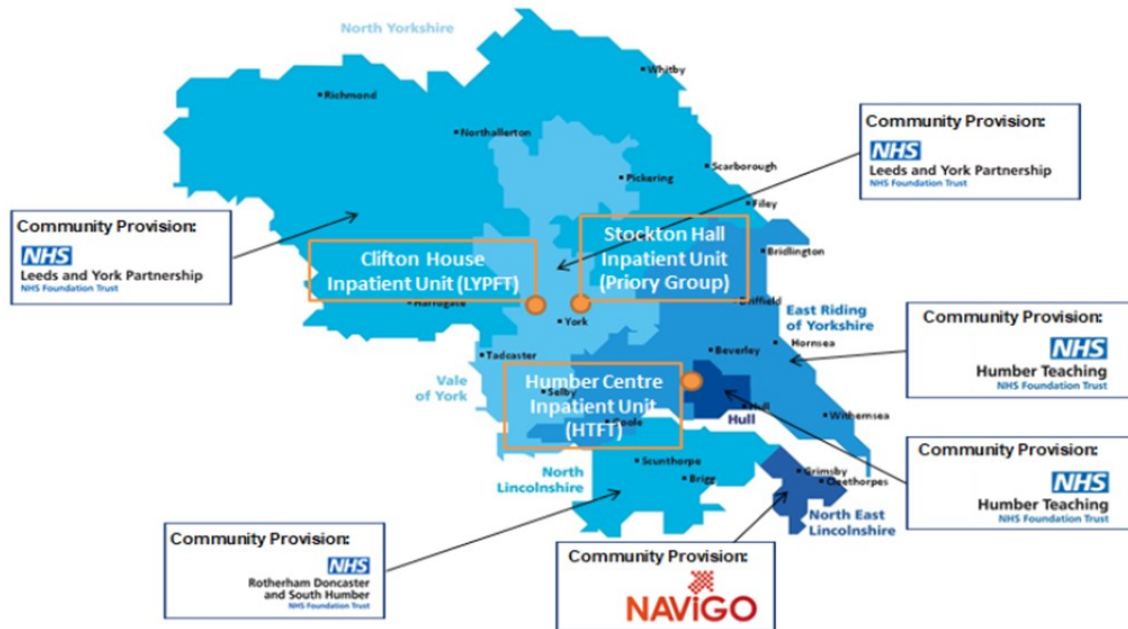
- Speak to your MDT and ask them who your community team is or will be
- Speak to a member of staff you trust
- Speak to Holly or Jo from the Involvement Network
- Speak to your advocacy services



# Update on the work so far:

## David Harvey and Steve Shaw

### The Humber Coast and Vale Provider Collaborative

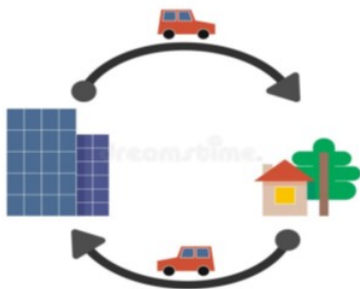


Our community to community pathway is now being implemented. Humber Teaching Foundation Trust (HTFT) in partnership with Leeds and York Partnership Foundation Trust (LYPFT) Community teams are leading on the single point of access from April.

**Great news** – Our Specialist Community Forensic Teams (SCFT) have secured additional funding, the introduction of our SCFTs in 20/21 has seen an additional 13 people step into the community.

We are continuing to turn the business case into reality, focusing on specific areas of work over the next few months including;

- Prison pathways
- Working with providers to repatriate as many people as possible back in to Humber Coast and Vale
- Inpatient pathways



# Family, Friends and Carer Engagement

## Family, Friends and Carers

- How do you currently engage with them?
- Has this changed due to Covid?
- What could we do to improve involvement of carers in Humber Coast and Vale?



**Humber Centre** – Have been sending out newsletters, letters and questionnaires to families. Only to have a small number of responses to the questionnaires each time. They are thinking of joining up with the community team to make engagement more available and attractive to carers in community venues, as the community team are also having difficulty engaging with carers. The plan is this will give hope to families so they can see, and promote successful move on into the community for their loved ones by joining up together.

**Stockton Hall** – Pre COVID have a really good attendance at carers events. Through COVID times have been more difficult, as not having visitors to the hospital. But they have kept in touch with families through the social work team. They want to get back to having the events as there is really good feedback from them, but they want to do it right so everyone feels safe to attend. They haven't had much contact with the community team but are interested to see how that works. Because they have service users from wider than HCV, they will like to know more about how it goes.

**Clifton House** – is a small unit so can struggle getting carers together. They are currently thinking about how to get information out to families from MDT meetings or CPAs they have attended virtually. They are taking minutes as virtual links aren't always the best, but are thinking about the safest and most secure route of distribution to ensure the notes get to who they need to.



**C** The term 'carers' isn't always the best term to use - families don't recognise themselves as carers, and so don't like it.

Perhaps events should be promoted around 'afternoon tea,' 'change event' or as a 'celebration'

**C** We need to make sure we use the right language so people will feel that they can get involved as it is something meaningful for them.

Carers should be able to brand their own group to describe it the way they feel is most welcoming and attractive.

**C** At Stockton Hall we call our events family and friends events and they are usually celebrating certain times of the year e.g. Christmas, Easter etc.

1:12 PM

# Family, Friends and Carer Engagement

Some services have carer events, and others support family, friends and carers individually in relation to people's care. But as an Involvement Network, we don't have direct contact or have the ability to get in touch with families directly.

As an Involvement Network we feel it would be great to have community family and friends events so we can attend to listen to issues, advocate for them and hear their solutions to improving services throughout HCV. We can also share changes happening in the area so everyone is up to date and can know what to expect from services.



## Next meeting

We will be talking about access assessments – this is when someone is being assessed to come into hospital, and we want to look at the information and communication you get both before, during and after the assessment and the decisions which are made as well as reasons for that.

Feedback – it's really good to know what will be discussed at the next meeting so we can have discussions with other people not attending as well as those that are, so we can feedback a wider set of perspectives. If questions are sent out before the event too staff can make sure this is fed through and discussions are supported prior to the meeting. It also gives extra opportunities for those who can't attend to give their point of view and to keep involved.

We are looking at this being a bigger project so will start to think about it at the next meeting together, but will talk as we come round services about it too. There's lots of work to do to get this right.

# Language and Jargon

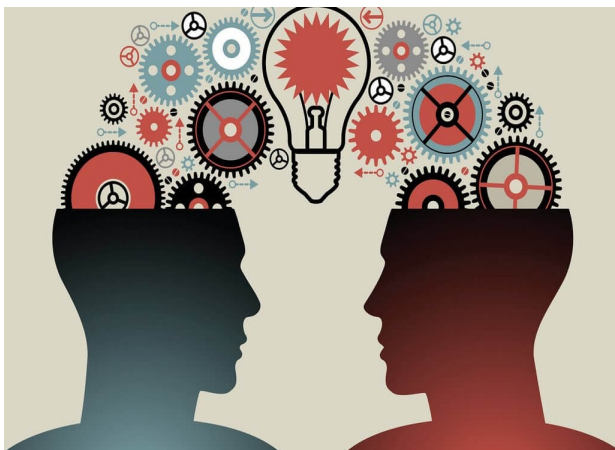
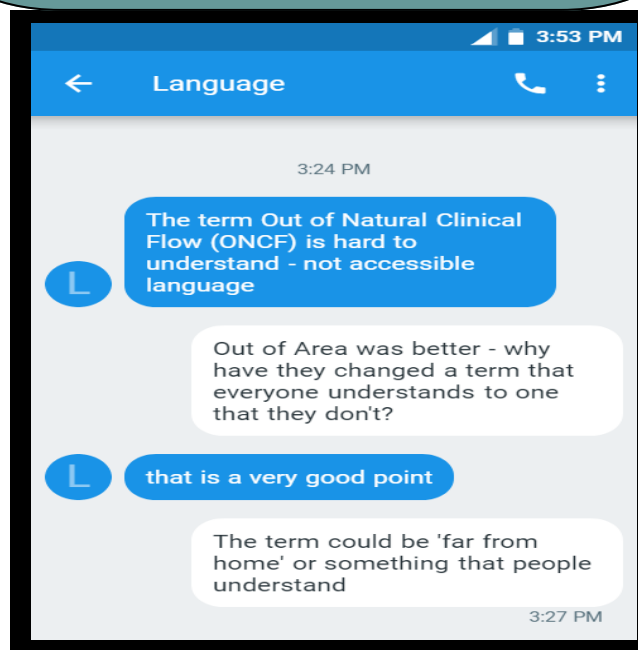
## Humber Coast and Vale

The country has been split into geographical areas. This is either the area of the country that you are getting care and treatment in at the moment or the area that you are from originally.

If you are from this area originally then you should be able to have your care and treatment here wherever possible if you want to.

At Stockton Hall, they have started a project with service users and staff to develop an 'urban dictionary' of language service users use. It can be a living document which is updated over time. Once developed they want to share across the services so we can see if there are any differences in language across different geographical areas. It will be a really good document so we can understand, acknowledge and use the language service users use. So we will watch this space as it's a really good idea and a lot will come from it!

Other language used across HCV is 'out of natural clinical flow'. This is to replace the term 'out of area' but we don't feel it is any better, and still not ideal. Something like 'far from home' could be ok but we really want to know from those who are in hospital out of HCV what they think, and how they feel connected with the area, or not.



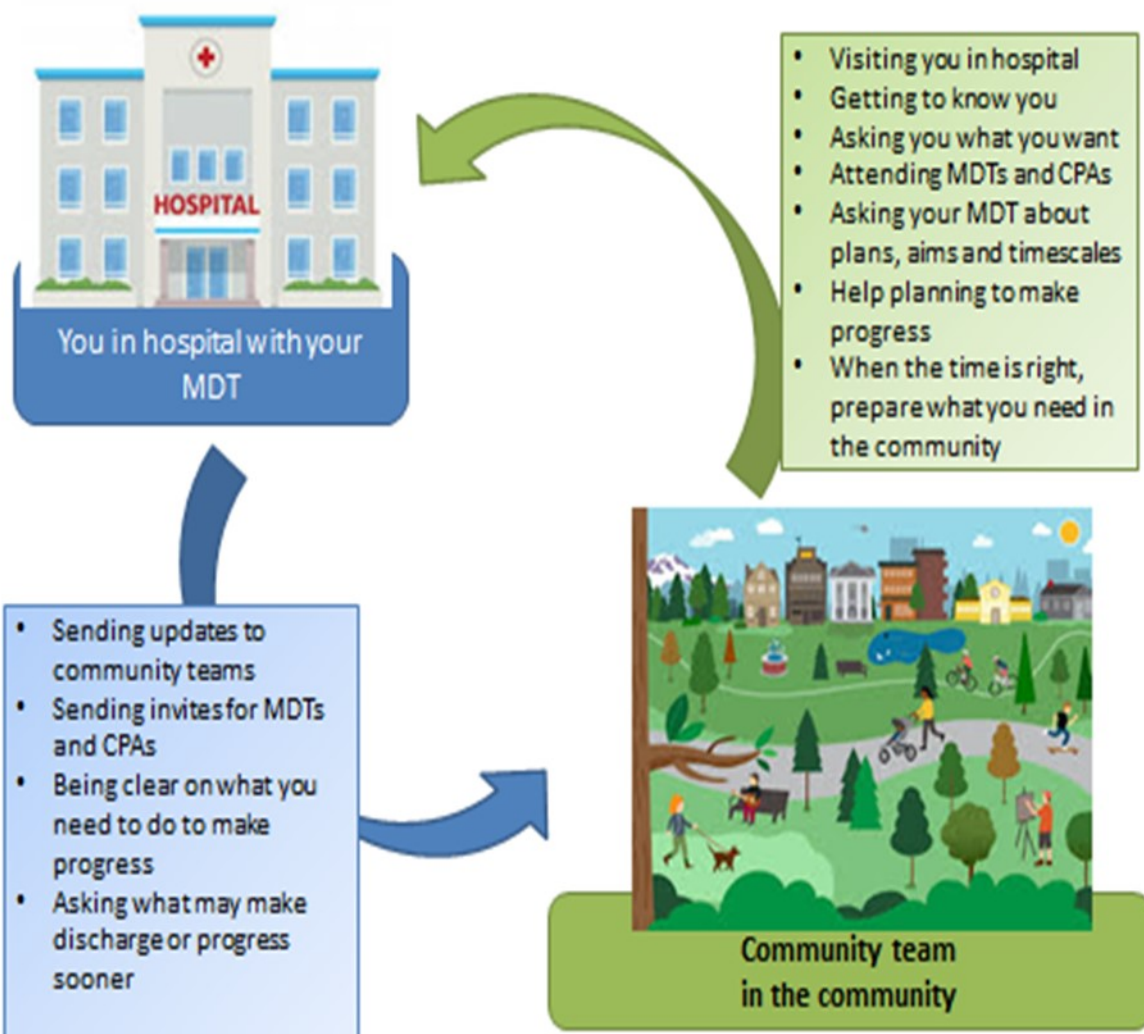
There are lots of words and terms going around which we all don't know exactly what they mean, and we might think we know what they mean, but not everyone understands them.







# What my contact should look like with my community team while I am in hospital



# Other discussions and updates

Awaiting an update on the logo competition! We are hoping to see some designs soon based on your entries that will then come back to this group for discussion and a decision!

## Logo Competition

**‘HUMBER COAST AND VALE PROVIDER COLLABORATIVE’**

**Are looking for a New Name, Logo and Strap Line**

What is the provider collaborative?  
The provider collaborative is the partnership between all mental health services in this region that are working to bring together those responsible for commissioning (“buying”) and those providing mental health services, to create care pathways that are joined and built around the needs of individuals regardless of which organisation is responsible for each element of that person’s journey.

Why does the provider collaborative want a new name?  
The provider collaborative wants to be friendlier and mean something to the people who are under its care, it wants to be personal to the region (as there is a lot of provider collaborations forming across the country)

What should the logo be?  
A logo is a small image or symbol that makes something easily identifiable- the logo you need to represent your region and be easily recognised as belonging to that region, it may include words that mean something too.  
Examples include...

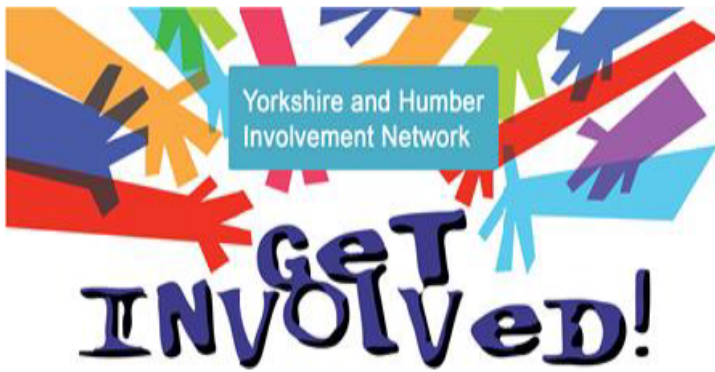
What is a strapline?  
A heading or caption to go with your logo is important to grab people’s attention- it is a few words that say what the provider collaborative are trying to do.

**Designs will be sent to the provider collaborative board where one will be chosen as the winner!**



We need to make sure we think about keeping in touch with people who move into the community, if they want to. They can give a good update on what it’s like moving on and how they are getting on. They may be able to offer peer support, or offer hope through telling their story etc. We need to make sure the same opportunities are available for people once they move on if that’s something they find meaningful.

We are also hoping to have think about how to engage people outside HCV. The Involvement Network, commissioners and community teams will have a think through events like this one, to keep this on the agenda. First thoughts from this meeting are through the website, newsletters, attending these events virtually or keeping people updated over the phone. We will think about this in more detail at future meetings



# Feedback Form



What has gone well today and why?



What could have gone better and why?



What would you like to hear about in the future?



Have you enjoyed it today and will you come again?



Thank you for your feedback as it is really useful in helping us improve



Contact Holly, Jo or Charlotte for more information  
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# Engagement Events for Service Users and Staff in Humber Coast and Vale Provider Collaborative

Next Date: 12th May

Time 2pm -3pm  
Venue: Virtual event  
– Microsoft Teams!

Dates for the rest of the year:

Wednesday 12th May

Wednesday 7th July

Wednesday 15th September

Come along and find out what is happening in your area, help us plan for the future and have your say!



Contact Holly, Jo or Charlotte for more information:  
[Hnf-tr.involvement.network@nhs.net](mailto:Hnf-tr.involvement.network@nhs.net)

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