WEST YORKSHIRE PROVIDER COLLABORATIVE

NEWSLETTER 4

West Yorkshire and Harrogate Health and Care Partnership

Yorkshire and Humber Involvement Network

Get Involved!

West Yorkshire and Harrogate Health and Care Partnership

Yorkshire and Humber Involvement Network

Get Involved!

West Yorkshire Provider Collaborative Engagement Event

Microsoft Teams

2nd November 1 –2pm

Bring yourself a drink!

	**Welcome & Ice Breaker**
	**Video What is a Provider Collaborative?**
	**What will the Provider Collaborative do in West Yorkshire?**
	**West Yorkshire Priorities**
	***West Yorkshire Involvement Re-Cap***
	**Next Steps... Tell us what you want**

Thank you for joining us for a West Yorkshire Provider Collaborative Event, it was great to see representation from all the services on the day, for those who couldn't join us we have captured the slides and conversation in this newsletter. We looked at 'what is a Provider Collaborative'? The values and priorities in West Yorkshire and recapped some earlier meetings and workshops that have taken place.

Contact Holly, Jo or Charlotte for more information:
Hnf-tr.involvement.network@nhs.net
www.yorkshireandhumberinvolvementnetwork.nhs.uk

West Yorkshire and Harrogate Health and Care Partnership

Cygnet Health Care

inmind HEALTHCARE GROUP

NHS South West Yorkshire Partnership NHS Foundation Trust

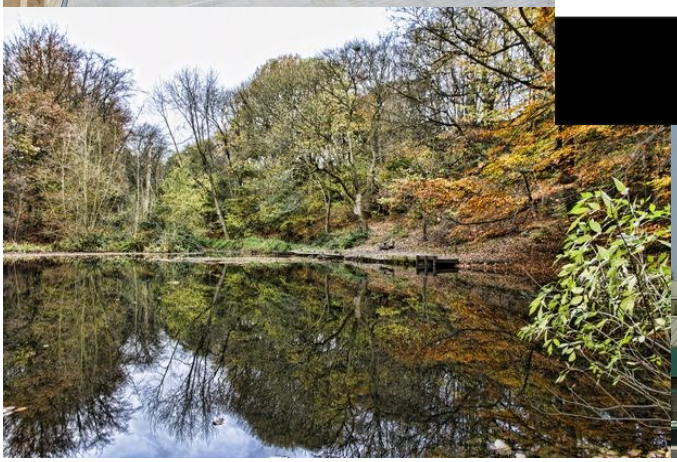
NHS Leeds and York Partnership NHS Foundation Trust

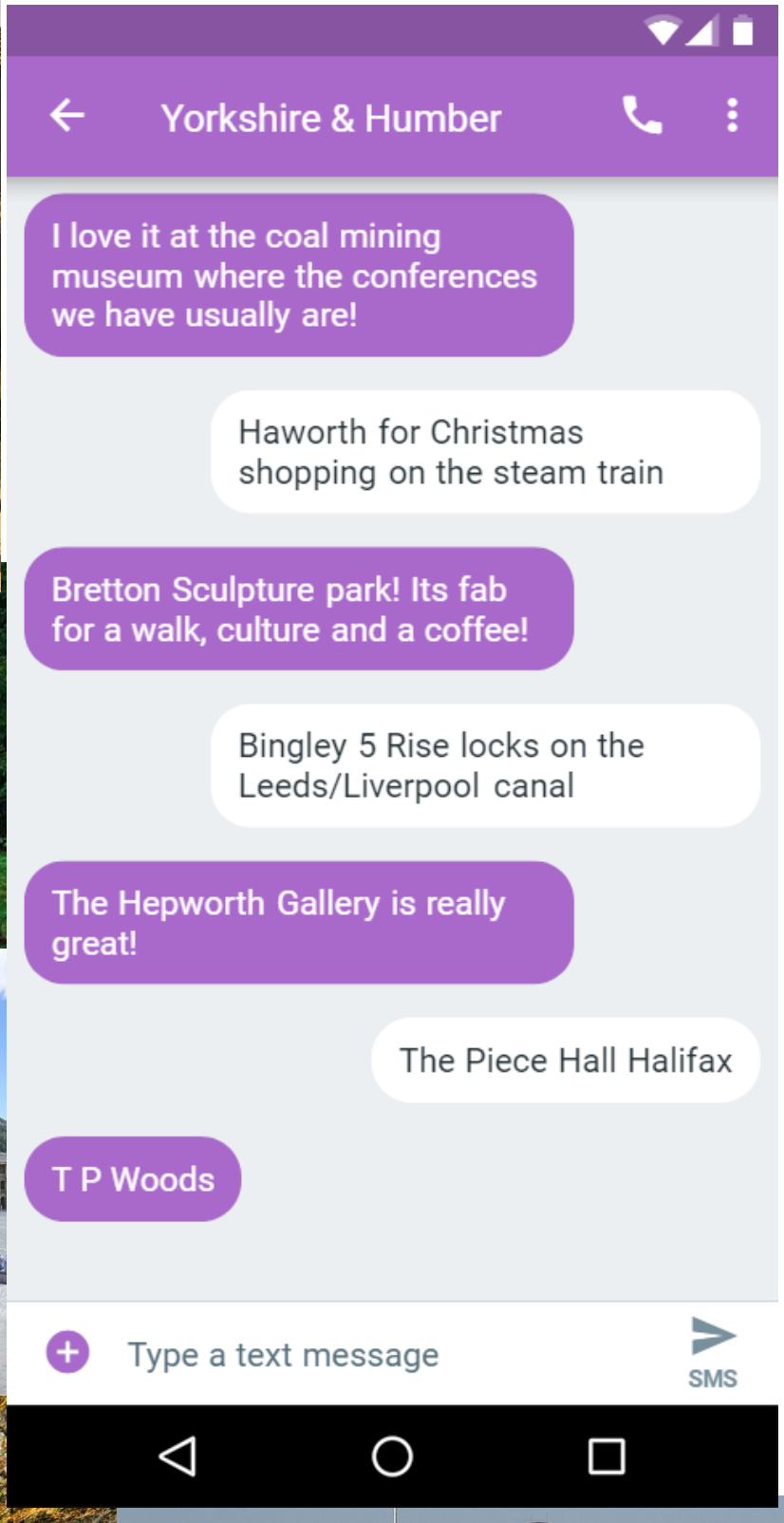
NHS Bradford District Care NHS Foundation Trust

Newton Lodge
Bretton Centre
Newhaven
Cygnet Bierley
Moorlands View
Waterloo Manor
Newsam Centre
& All guests

Tell us… Where is your favourite place to visit in West Yorkshire?
Raise your hand, shout out, or tell us in the Chat!

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




Yorkshire & Humber
I love it at the coal mining museum where the conferences we have usually are!
Haworth for Christmas shopping on the steam train
Bretton Sculpture park! Its fab for a walk, culture and a coffee!
Bingley 5 Rise locks on the Leeds/Liverpool canal
The Hepworth Gallery is really great!
The Piece Hall Halifax
T P Woods
Type a text message
SMS


NATIONAL
COAL MINING
MUSEUM FOR ENGLAND

I am responsible for the West Yorkshire Adult Secure Provider Collaborative and to ensure that it works successfully for everyone involved.

In order to achieve that, it is important that I listen to everyone's views, and reflect those views in the way we make decisions in the Collaborative.

Hello everyone my name is……..

Sean Rayner

I like cycling, watching Leeds United and going to music concerts

I am Head of Programme for the Provider Collaborative, ensuring the way we work between partners is clear and understood in order to help us plan and make decisions

In order to achieve that, it is important that I listen to everyone's views, and reflect these in the way we work as a Collaborative

Hello everyone my name is…

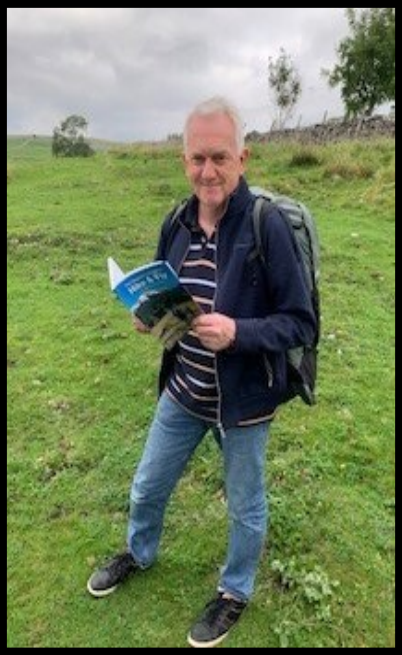
Izzy Worswick

I love being outdoors and running

Hello everyone my name is…

Ged McCann

I am helping the collaborative set up commissioning arrangements across West Yorkshire



I love walking in the hills and reading – sometimes both at the same time…….

… and anything that makes me laugh.

Hello everyone my name is…

Jo Barber

I am a Clinical Lead for the West Yorkshire Provider Collaborative.

I am passionate about developing services that meet the needs of all, and ensuring we learn from people's experiences.

I love walking with my Dog and the beach.

This is Ginger: who you will often hear barking on teams calls ☺

Hello everyone my name is…

Laura Gow

I am a Senior Advanced Clinical Practitioner and making sure you receive the best care we can offer is important to me.

I love music and being active

Hello everyone my name is…

Claire Girvan

I am the quality lead for the Provider Collaborative and I would really like to hear about your experiences being in hospital

I love TV and sleeping

"The more skilful the intervention the OT makes, the smaller the 'footprint' they leave"

http://www.nimhe.csip.org.uk/silo/files/progressreportpdfapril2007.pdf

[NHS-led Provider Collaboratives: improving mental health, learning disability & autism services – YouTube]

West Yorkshire Adult Secure Provider Collaborative

Partners

Service users, carers and their families

inmind HEALTHCARE GROUP

NHS Leeds and York Partnership NHS Foundation Trust

NHS Bradford District Care NHS Foundation Trust

Cygnet Health Care

Wider CCG, Local Authority, Housing and Third Sector Partners

NHS South West Yorkshire Partnership NHS Foundation Trust

Collaborative objectives

Improved use of inpatient beds

This will be done by:

- SPA (Single Point of Access)
- Single bed management system
- Consistent access assessments
- Clinical oversight of placement decisions

Provision of services not currently in area

This will be done by:

- Personality Disorder pathway
- Enhancing women's pathway
- Yorkshire & Humber wide approach to Learning Disability & Autism services

An enhanced community service offer

This will be done by:

- Developing a specialist community forensic team (SCFT), with an emphasis on in-reach and support to those unable to progress through existing pathways.
- Working with those small number of service users who have a long inpatient stay
- Forensic Outreach Liaison Service (FOLS)
- Closer working with criminal justice system, complex care and PICU

Specialist Community Forensic Team

Specialist Community Forensic Teams

NHS South West Yorkshire Partnership NHS Foundation Trust

a) NHSE published new data which shows length of stay in secure care is reduced if there is appropriate community support.

b) SCFT's are part of The Five Year Forward View for Mental Health: a report from the independent Mental Health Taskforce to the NHS in England (2016); they form part of a transformation for secure care.

c) SCFT's are a multidisciplinary team promoting early discharges from secure care. They will provide high intensity support and interventions to maintain patients within a community setting.

With **all of us** in mind.

12 Core Components to Service

1) Care pathway management
2) Specialist forensic assessments
3) Therapeutic interventions
4) Peer mentorship
5) Skills and competencies
6) Carer support
7) Specialist case management
8) Crisis response
9) Psychological interventions
10) Substance misuse
11) Education and employment support
12) System relationships

What support do we offer?

The SCFT works together with the people we support to ensure they feel listened to and that their opinions and views matter. We will take into consideration your past experiences and you will receive individualised care.

We can offer you support in several ways:

- Support for you and others working with you to manage risks in the community that have previously required support from secure hospitals with medication and treatment
- Psychologically led support and interventions
- Financial advice and support
- Support with accommodation and living arrangements.
- Education and employment support
- Support with independent living skills
- Support with substance misuse
- Community reintegration
- Community networking
- Peer mentor support

The team will visit you at home or in the community.

Our aim is that you will receive a package of care that ensures you have all the support you need. You will also have an individual crisis plan with clear plans and contacts in place if you need them.

Which professionals are in the team?

Support available from the team includes care coordination, psychiatry, psychology, social work, housing and peer support, occupational therapy and nursing.

Why have I been referred to SCFT?

You might have been referred to us if:

- You are currently in hospital and your clinical team feel that you are ready to move on.
- You, your family or carers and others working with you are concerned about you, or your potential risk to others.
- Your previous care team may be concerned that you are at risk of committing a crime.
- You are living in the community and are experiencing crisis, and it would be helpful for you to have some specialist support.

What happens next?

An assessment will be carried out by two staff members from the SCFT to decide if the SCFT is the right service for you. They will meet with you to have a conversation about if and how the SCFT might be able to support you. After the assessment has been completed and discussed, the SCFT will feedback to you about the outcome of the assessment.

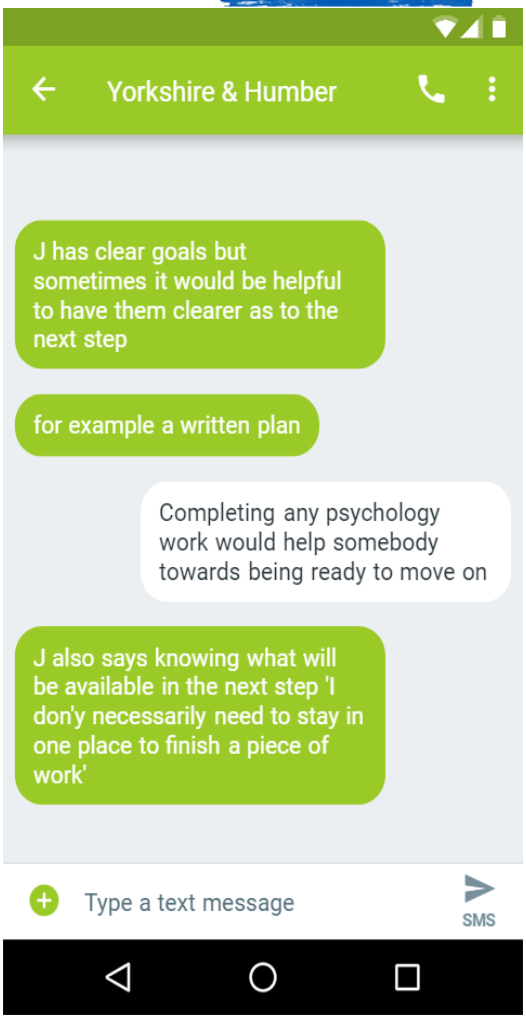
Confidentiality

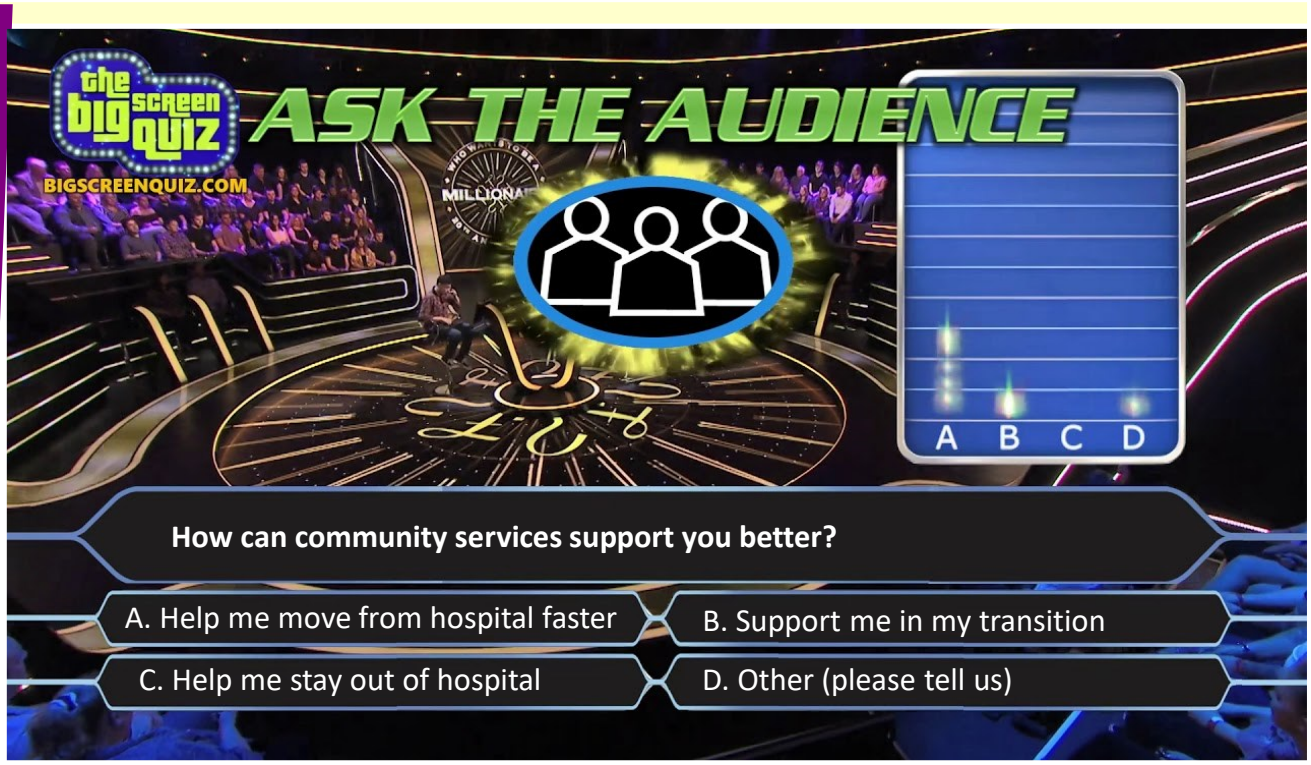
Confidentiality is very important to us; we will protect and safeguard your personal information, and this will only be shared on a need to know basis. Further information about this will be explained to you in person.

Please discuss with us how we can ensure no one stays 'one day more' than they need to on each step of their pathway

With **all of us** in mind.

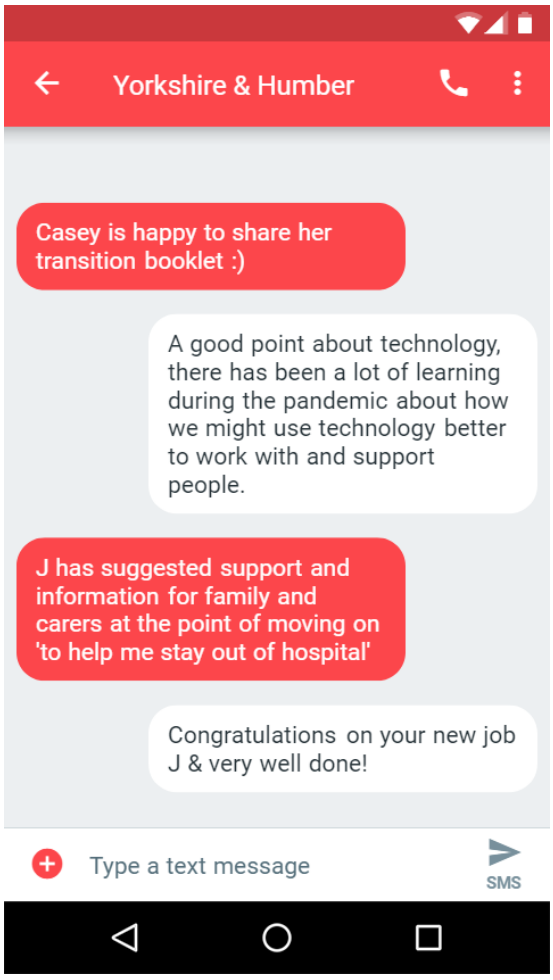
- CPA goals need to be clear
- Transition booklet (Waterloo to share)
- Self help leaflets
- "Plan on a page"
- Need to know what goals are– care team priorities are different
- Discussion is key
- Sitting down and collaborating on the what and how
- Clear timescales agreed
- What is available at next step– can work be continued there?
- Pathway needs to be integrated and joined up– staff from next step can meet you?
- Technology– Avatar App
- The Provider Collaborative needs to be innovative and test out ideas
- Room for investment?
- What's available post covid?
- Share good examples and ideas





"Tell us how we can improve community services to support your move on from hospital, provide you with the support that you need, and work towards preventing a return to hospital in the future"

With **all of us** in mind.



- Work roles need to be set up so we don't fall back into old ways
- Fed up sat about in independent living
- Help to stay positive and focus on the up
- Information for family and friends— help them to know how to support people and recognise when they need help
- "Plan on a page" for families
- This is bigger than just health– it includes all wider community services e.g. work/ volunteering/ libraries
- They need to be preventative
- "if only there was more support before– help and advice at the time"
- We need to look at before crisis support
- Education/Working with community

Re-cap: Meeting 1 @Sandal November 2019

Group Work 1 — 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

Group Work 2 - Peer Support

What should peer support look like in the community?

What would a peer support worker do?

What qualities would a peer support worker have?

What should Peer support look like in the community?

Could potentially recruit from current volunteering people
Important to get regular people – build trust and have someone that we know when we move on
Want to be involved in choosing who their peer support person could be. Not just a random person allocated. Familiar people important.
Without peer support feel more vulnerable to being taken advantage of
Need to have a wealth of knowledge than clinical staff don't have. But have some training too.
Possibility of peer support workers building confidence via 'buddy' system before formal training
Peer support workers can work 4 hours a week – makes the role manageable
Provides opportunities for peer support workers to spend their time constructively
Paid role maybe more successful

Group Work 3 - Support for Carers

What support is available for carers now?

What would you want to see going forward?

What support is available for carers now?

Importance of language—by carers we mean friends and family!
Carers day – explaining to carers about relapse prevention and signs to look out for
Invited to ward rounds and CPAs
Home leave – meeting half way
Contact with doctor and named nurses etc.
Carer know who to contact for support if they are struggling or need to ask a question
Carers events
Carers hub – Gathering and resource point
Carers questions and answers with professionals and create dialogue

Group Work 4— Housing Support

What would you want to see going forward in terms of housing support from a community team?

What would you want to see going forward in terms of housing support from a community team?

More access to bespoke areas with choice of where to live
Plan – knowing where you are going – timescales
Service user input – where they want to go and what's best for them
Support worker to be in touch
Bills, budgeting, shopping – may need support with this
Starter pack – when you move in
Check up on individual – not just give keys and leave
Supported living

Re-cap: Meeting 2 @Sandal February 2020

Group Work 1 - Personality Disorder

Men personality disorder

Difference in opinions as whether to separate personality disorder to other diagnosis patients.

Similarity with staff and procedures.

Staff consistencies, regular staff.

Keeping to boundaries.

Community teams in community – specialised in personality disorder.

New service

Early intervention and links with schools/colleges/education.

Family awareness and friends more involved to help dispel fear and help understanding.

Building trust with professionals and consistency.

More liaison and visits from the community team.

Leeway for urgent appointments with professionals.

More choice on different hospitals/organisations.

More education for people on different personality disorders.

Group Work 2 - Women's Pathway

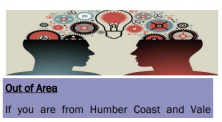
Women's services
Access to local low secure services.
Disadvantaged in comparison to men's pathway.
Pathways separate wards for different stages of recovery.
Rotation with psychiatrists.
Contact with families.

Out of area problems faced by service users
Some like to be close to family and familiar area.
Lack of support from home team.
Time to travel to see family.

Benefits of being out of area
If really ill lessens impact on family.

Environment in services

Internal day centre, ie access to day to day planning goods, access to computer courses, external links for support in communities.



Re-cap: Meeting 3- Virtual June 2021

South West Yorkshire Partnership NHS Foundation Trust

Experts by Experience

- Provider Collaboratives are committed to develop and deliver services in collaboration with service users and carers
- One way of doing this is to involve experts by experience at different levels in the collaborative
- Some collaboratives employ dedicated experts by experience, others have a variety of approaches
- We would like to understand how best to do this in our collaborative
- We want to explore what the advantages and disadvantages are of possible different approaches

Voting time... Secure Quality Involvement (SeQuIn) Tool

Quarter 4 choice- all services in West Yorkshire will complete one of the following options (as well as Involvement, RRP & Technology) to ensure we can benchmark against each other and continue to share good practice:

- Do your experiences match what the Niche Report found?
- How do they match/differ?
- How can we make sure the recommendations happen?

If we have issues providing support to BAME groups it might be worth targeting the peer support EbyEs recruitment to ensure we combat any unconscious bias in how the services operate??

Activities need to be age appropriate and functionally appropriate, especially for the over 55's

Access to care co-ordination is as big an issue as accommodation

quality accommodation an issue

Care pathways,and referral processes for aftercare/Responsible Heath &

Logo & Theme

- What do people think about when thinking of the collaborative?
- What does West Yorkshire mean to you?
- What ideas do people have about
- the Provider Collaborative Logo?
- Any Colour suggestions?

I don't think the term PC relates to everyone and they understand what it means

Rainbow as different colors means different areas

I like the white rose & rainbow ideas

rhubarb triangle

The term 'provider 'does not represent all

A name for the Collaborative is something we need to work with you all on

I think the name and logo would be a good session

the logo will end up as a flat cap surely!

We'd like to see a flat cap too lol

⇒ Transition Booklet from Waterloo Manor to be shared and further discussions around transitions

⇒ Name the Collaborative

⇒ Involvement Baseline– what does involvement look like in West Yorkshire?

If you would like to answer any of the questions asked in this newsletter please send them to the Network email below, contact us through our website Yorkshire And Humber Involvement Network – Welcome or ask a member of staff to email us your responses! We can also pass on queries to the West Yorkshire Provider Collaborative too.

Yorkshire and Humber Involvement Network

GET INVOLVED!

Feedback November 2021

West Yorkshire Health and Care Partnership

What has gone well today and why?

What could have gone better and why?

We want to involve you more at these meetings - any ideas? What are the next steps for the West Yorkshire meetings?

What were your views on 'How do you know when the time is right to move onto your next step?'

What were your views on 'How can community services support you better'?

Have you enjoyed it today and will you come again?

Contact Holly, Jo or Charlotte for more information
hnf-tr.involvement.network@nhs.net

www.yorkshireandhumberinvolvementnetwork.nhs.uk