

HUMBER COAST AND VALE PROVIDER COLLABORATIVE

EDITION 8



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

We had a great meeting starting with getting to know more about key staff in the new CPaQT (Collaborative Planning and Quality Team). Then we had a really useful update from the team about what the team does and how it can help people. This was followed by more information about the reason for some inequalities work happening across HCV and what this actually means for everyone. Then the meeting was opened up for the 3 secure services in HCV to tell the meeting about what involvement is like in each service—the good, the harder stuff, and the wishes for improvement! Then we talked about next steps!!

We hope to see you all at the next meeting!

**Next meeting:
12th January
2022
Time: 2-3**

THANK YOU

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GET INVOLVED!

Humber Coast and Vale Engagement Event Agenda

1	Welcome and Introductions
2	Getting to know the PC team
3	HCV Update Steve
4	Advancing Equalities David
5	Round Robin Involvement - Over to you!

Teams

Wednesday 10th November 2 — 3

Bring yourself a drink!

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

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

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Meet the team behind the Humber Coast and Vale Provider Collaborative

Hello everyone my name is...



David Harvey

I am the Clinical Director and a Psychologist

I help plan services for people to get back to the community as soon as possible and help where there are issues with this

I go to the gym and run as much as possible!

I am learning how to make alterations to clothes

I am thinking about getting a dog for the first time



Hello everyone my name is...

Steve Shaw

I am the Head of Secure Care

I work with services to try and deliver the best care we can across our Humber Coast and Vale Secure Services.

Favourite Quote;
'Some people want it to happen. Some people wish it would happen. Others make it happen. Michael Jordan.



I love pushing my limits, my dog maybe not so much ☺.....



Favourite Food;
Meat, meat, meat and meat.



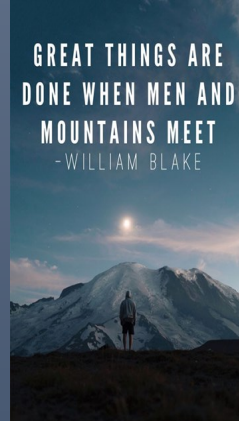
Humber, Coast and Vale Specialised Mental Health, Learning Disability and Autism



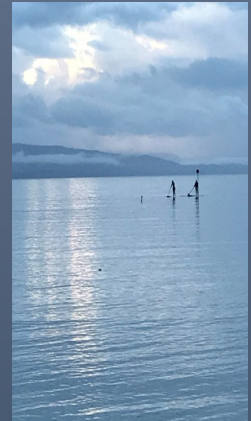
Hello everyone my name is...

Gareth Flanders

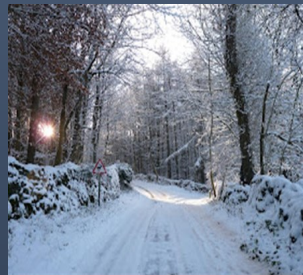
I lead on Quality Assurance and Improvement and my role is to make sure people who use the services have the best quality care possible and help services make improvements



Quote



Having a go!



History and belonging



Farming and nature

C-PaQT – Collaborative Planning and Quality Team

What is the Collaborative Planning and Quality Team?

We are called C-PaQT for short (pronounced 'see pact')

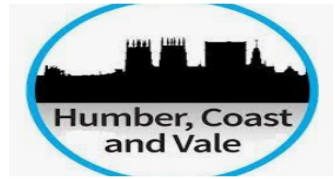
We help plan what services are needed and where to meet people's needs

We helps hospitals and community services ensure they deliver good care that is safe and effective

We manage the money and contracts

We used to be called the 'commissioning team' but have changed this so that it is clear we are working alongside services to help improvement as much as possible

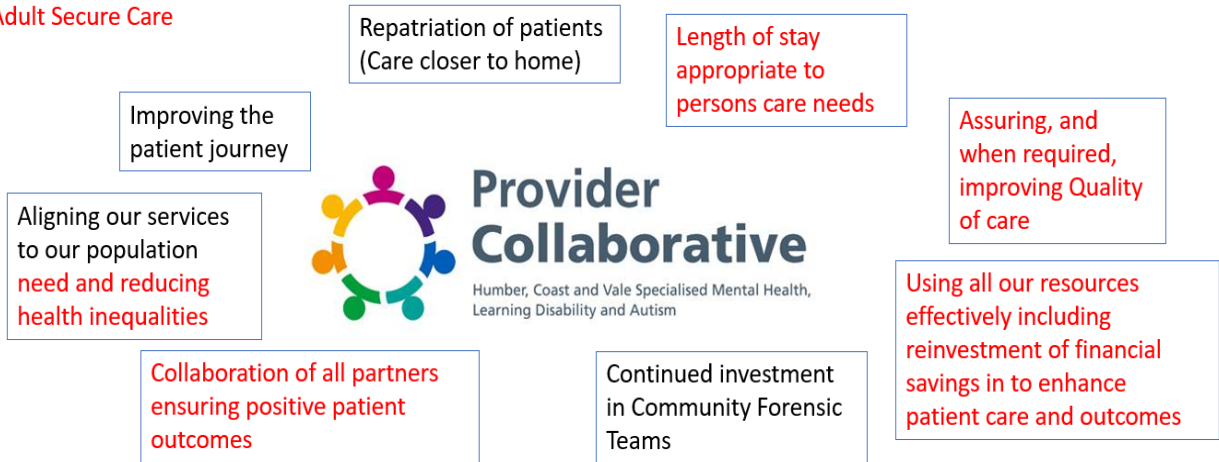
Humber Coast & Vale Provider Collaborative Update! (November 2021)



Live from the 1st October 2021
Responsible for:

- CAMHS In-Patient
- Adult Eating Disorders In-Patient
- Adult Secure Care

Our Adult Secure Care focus



Our core principle is: *Working in partnership with the people who access our services and those who provide care services across HCV - we will deliver best quality outcome-based care close to home through the introduction of meaningful efficiencies into care pathways, within a rigorous governance framework and a culture of learning and evaluation*



We interpret themes and trends to improve care, we want to make ways of working smoother and positive for everyone; service users and staff
 We have an overview of all the services in HCV
 We can save money and re-invest for example into the SCFT or other community provision
 We used to be known as commissioning and now we are C-PaQt and we want to work all together, not from the top down
 We are a passionate team who wants to make a difference
 We also cover CAMHS and Eating Disorder services and we have a focus on 18-25 and that transition point from children's services to adults that can be harsh



HEALTHCARE



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

What are health inequalities?



They are avoidable, unfair and systematic differences in health between different groups of people

Especially for people:

- From poorer areas
- With protected characteristics – age, sex, race, sexual orientation and disability
- Who are vulnerable, such as migrants, homeless people and sex workers
- In certain geographical areas

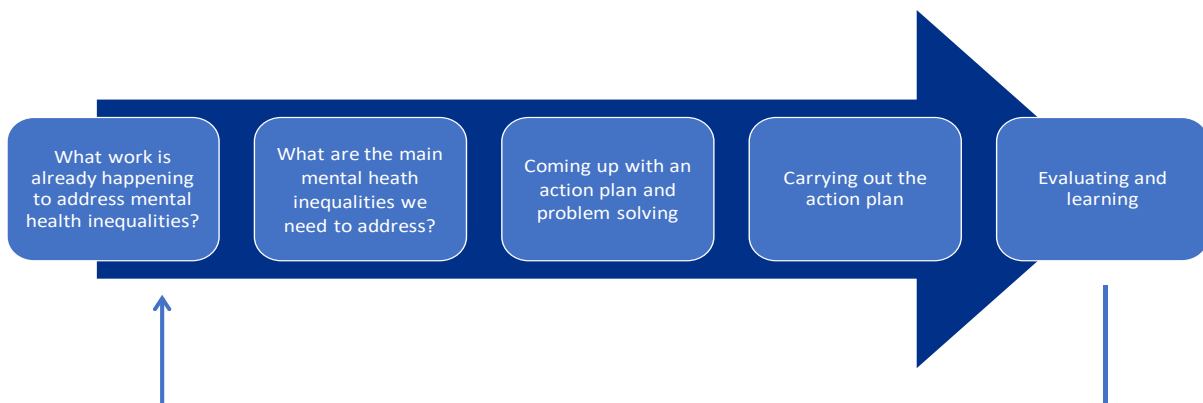
Inequalities can be in:

- Access to services
- Experiences of services
- Outcomes from interventions

ADVANCING HEALTH EQUALITIES ACROSS HUMBER COAST AND VALE

Pioneering discussions and plans in advancing equalities are happening now in HCV
The top picture shows the left is bright and breezy, the right is not
We want everyone to have the best opportunity to have a healthy, positive wellbeing and full life
We want to ensure all people can access services – to have physical and mental health equality
Currently in the early stages of phase 2- gathering information. We are working with Jo and

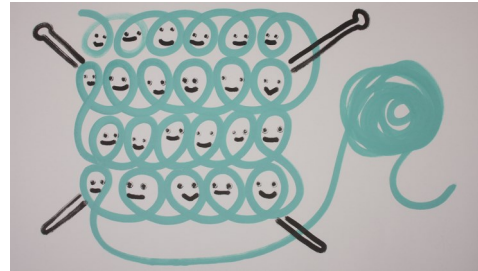
Our plan to tackle mental health inequalities



INVOLVEMENT ROUND ROBIN

|| Involvement roles, capacity and areas to improve upon in HCV

- What is involvement like in your service?
- Share some examples of good practice in your service
- What are the barriers to great involvement practice in your service?
- If you have a magic wand how would involvement look and be like?



Involvement at Stockton Hall

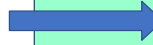
What does 'involvement' look and feel like at Stockton Hall?

- Please answer these questions to support your description:
 - Do you have a named Involvement Lead? Is this their full time role?
Yes Scott Atkinson is the full time Recovery Lead
 - Do you have any Experts by Experience? What does this role look like?
Not Currently
 - Do you have Peer Support Workers? What does their role look like?
 - No
 - Who links in to the Provider Collaborative?
Scott Atkinson, Alison Nelson & Liz Littlewood plus service users that attend various meetings.



Show us some examples of 'good involvement practice' at Stockton Hall - please add photos and a small description of your achievements

Newsletters & Posters



Microsoft Edge
PDF Document

Lack of understanding around involvement

RRP Meetings

Service user meeting

1:1 with staff/advocate

Open university courses

CPA/CTR/Tribunals/Care Plans

Carers Events & Meetings



Tell us about the barriers you face to 'great involvement' - we can problem solve together

No OT in at Weekends

Activities and Vocational opps tend to shut down over weekends, Holidays etc.

Leave restrictions based on time of year

COVID

FACE MASKS

Breakdown of rules structure & boundaries

Setting unachievable goals (behaviour based)



If you had a magic wand - what would you do to improve involvement at Stockton Hall?

Paid Roles for Experts by Experience

More activities/ OT in the evening

Post Covid activities such as Football have not re started in the hospital or the community

More Staff

To be more involved in care such as treatment planning.





Involvement is hard to define—Service users are unclear on what it is
 Activities are 'Monday—Friday 9-5' then nothing until bedtime
 Family and friends events are really good and need to happen soon
 We are fundraising our own funds – the shop cannot be for profit anymore
 and that was the way we used that money to do things



INVOLVEMENT AT CLIFTON HOUSE

In Our Service (Clifton House)



- The OT on Riverfields is the Involvement Lead.
- We do not have designated 'Experts by Experience', but over the years our patients have written PowerPoints about their pathways.
- These are delivered as part of staff inductions and to local Universities to Healthcare students. Patients are paid.
- We do not have Peer Support Workers, but run a buddy system, where service users 'opt in' to assist new patients settle in. There is a checklist to help them do this.

Involvement - our Service (Clifton House)



On-ward Clinical Governance Meeting

Patients discuss issues that have arisen in Community Meeting with ward staff and manager and others from the MDT.

Patient Council

Patients and staff from all wards meet to discuss issues arising from the Community Meetings, Clinical Governance Meetings, Regional and National Meetings.

Service-Wide Clinical Governance

Patients are invited to discuss issues which have arisen at Patient Council with Managers.

Regional and National Meetings

Representatives from our wards attend the Humber Coast and Vale and other User Involvement Meetings.

Technology Fatigue....

We still Cannot Meet in Person!

- Wards
- User Involvement Meetings

Involvement has diminished over time, the wards become more separate...



Ways we have tried to compensate....

Feedback from the Wards

Due to logistical issues, a joint Patient Council could not take place. All wards were individually approached and they were requested to feedback how things were going. These were the answers given.....

Bluebell

- Arlo the new OT is settling in, and we have a new staff HCA called Pippa.
- The team are working well, and the coffee mornings are 'brilliant'.
- There are not enough staff. When there are, they are sometimes borrowed by other wards. It would be nice if they could spend more time on the 'shop floor' instead of writing things out in the office. This would be especially helpful to new patients who want to feel safe amongst their new patient group.
- The cook chilli can be dry. It would be good if we could enjoy a ward meal once a week, perhaps soup, stew and fresh vegetables!

?

When can the wards mix again?

Westerdale

- We have 2 new nurses, two new students (Charlotte and Shannon).
- Students feel supported, and any questions they have are answered by the team.
- On Thursdays there is a popular community trip. Recent outings have included Beeston (gothic) and the Railway museum.
- We have a new table-tennis table, which is proving popular.
- People still like to cook chilli, but the ward try to provide one meal a week and two lunches.
- It would be great if we could have a few trips further afield such as Whitby and Flamborough.

Feedback from the Wards

Riverfields

- Staff and patients enjoy a good rapport, and patients are getting opportunity to achieve what they need to.
- Students on placement here feel positive... really like it here, learning a lot. Everyone follows protocol, but a not even!
- Two service users presented PowerPoints on their life histories to 90 York St John students. They also contributed to the group discussion about desirable values and principles in healthcare.
- A new ward policy/protocol was written. Patients use a sockery mug so long as they keep it safe.
- Patients can now use the WiFi on main ward. This has had a great benefit to ward dynamics, people watch films together, check outtings on the internet and join their own music appreciation group.
- Patients run their own jamming group on a Monday. Dr. Jay attends and plays guitar too.
- We presented our experience of using Technology on Riverfields to the User Involvement Strategy.
- The Polypunctal, we have now planted asparagus, winter lettuce, aubus, blackberries and potatoes.
- Wednesday trips out have included: donkey sanctuary, town trips, bowling and cinema.
- Art groups have commenced on Fridays due to patient demand. The art room has been reclaimed.
- Staff would like a decent staff room.

?

Can staff get out with patients now? (This has since been clarified.)



INVOLVEMENT WHAT DOES IT MEAN TO YOU?

If we had a magic wand - we would improve involvement at Clifton House by...



All meeting up again in the Shared Space and in Wakefield to get to know each other and work together again!

EbE powerpoint presentation get 2 hours pay

Vouchers are given by the university for presentations along with a reference and student feedback- this has helped some people gain more leave with the MoJ Food always gels us and in COVID we haven't been able to eat together indoors, we went outdoors until it was too cold, now we are drinking soup at a large distance- no bread though.

We miss the informal days of Sandal Rugby Club - the gossip! That carrot is missing so



INVOLVEMENT AT THE HUMBER CENTRE

What does 'involvement' look and feel like at the Humber Centre?

- Please answer these questions to support your description:
 - Do you have a named Involvement Lead? Is this their full time role?
Yes – Yvonne Flynn works as Involvement Lead part time. We also have identified staff on the wards who will take a lead with involvement.
 - Do you have any Experts by Experience? What does this role look like?
Yes – We have access to experts by experience via the Trust wide patient and carer experience team
 - Do you have Peer Support Workers? What does their role look like?
Yes - We have one peer support worker employed in the service
 - Who links in to the Provider Collaborative?
Yvonne attends as well as service users that attend various meetings.



Re-integration and COVID recovery is our current focus. There are a lot of opportunities which had to stop- staffing and safer staffing has been an issue. We have more occupational activities and Recovery College courses on the way. So it is very exciting times ahead.

Show us some examples of 'good involvement practice' at the Humber Centre - please add photos and a small description of your achievements



- FACE TO FACE patients council
- Education Dept / recruiting for teacher
- Service user job descriptions
- Certificates of achievement
- Service user led gym programme
- Service user attendance at clinical network





Next Steps

1. Gareth from C-PaQT to talk to service users at the end of their journey to look at obstacles and what has gone well. *Exit Interviews
2. Define Involvement- what does it mean for HCV (more work to compare and contrast roles to get equity ? lead interviews and task and finish group
3. SCFT/ community Involvement slides for next meeting
4. Gareth to continue regular catch ups with the Network
5. Steve now has a baseline for Involvement- would like to work on some 'expectations'



WHEN WE SUPPORT EACH OTHER, INCREDIBLE THINGS HAPPEN



Collaboration. Hope. Encourage-

Feedback Form



If you would like to answer any of the questions asked in this newsletter or provide any feedback then please contact us through the Network email, contact us through our website or ask a member of staff to email us your responses! We can also pass on queries directly to the Humber Coast and Vale Provider Collaborative too.

www.yorkshireandhumberinvolvementnetwork.nhs.uk

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





We are Holly, Jo and Charlotte working with the Humber Coast and Vale Provider Collaborative

Get In Touch with us on:
hnf-tr.involvement.network@nhs.net



Next Event
Date:
12th January 2022

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 www.yorkshireandhumberinvolvementnetwork.nhs.uk