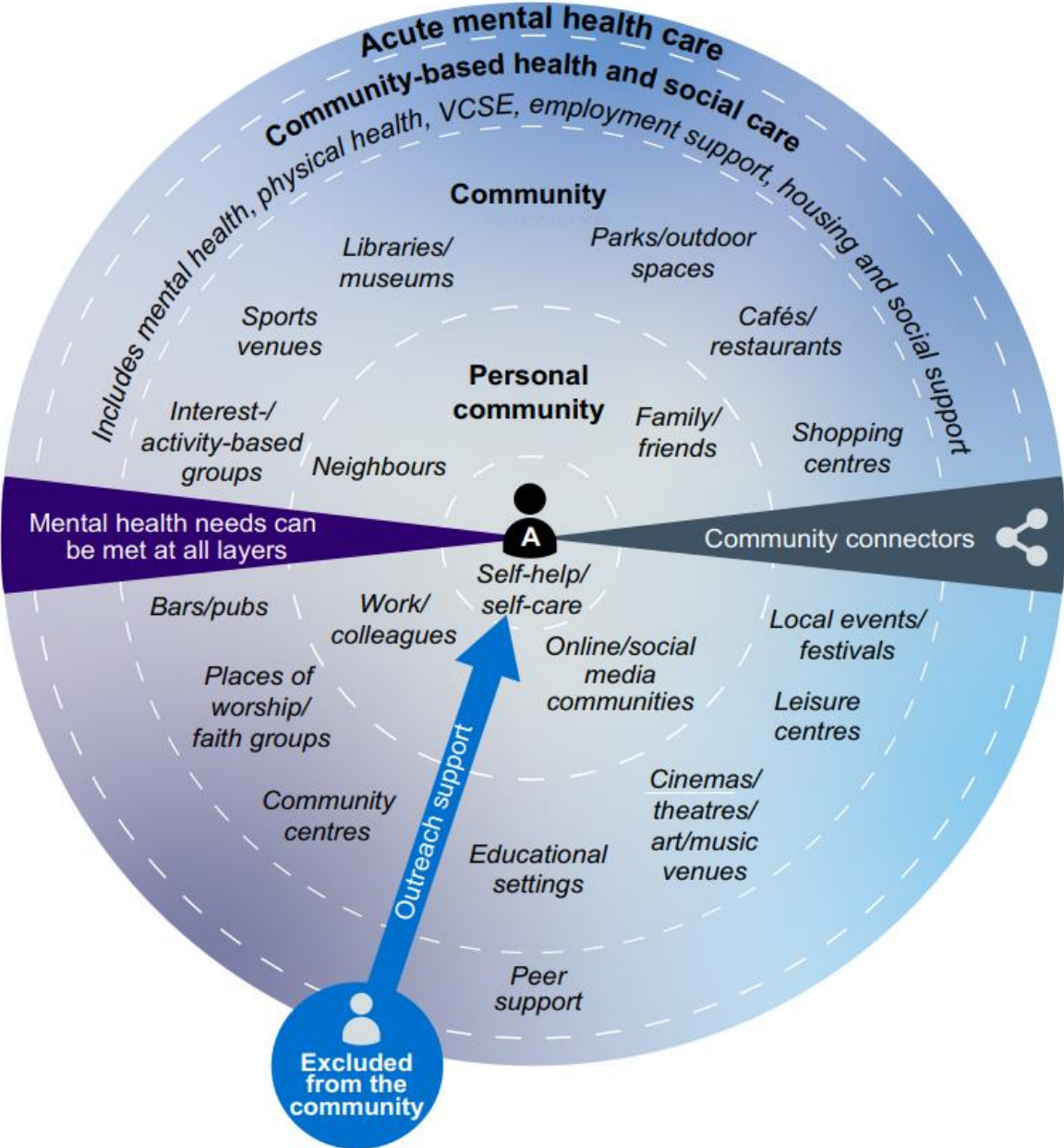


# Neighbourhood Steering Group Community Mental Health Transformation

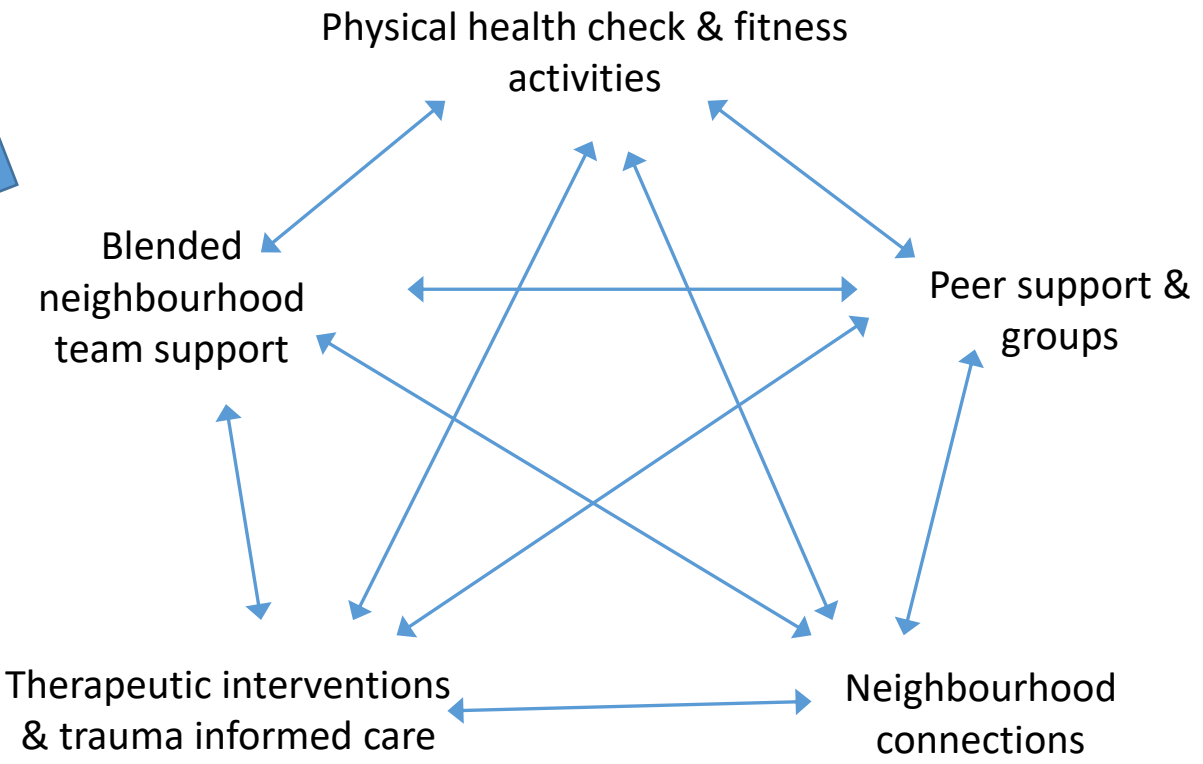
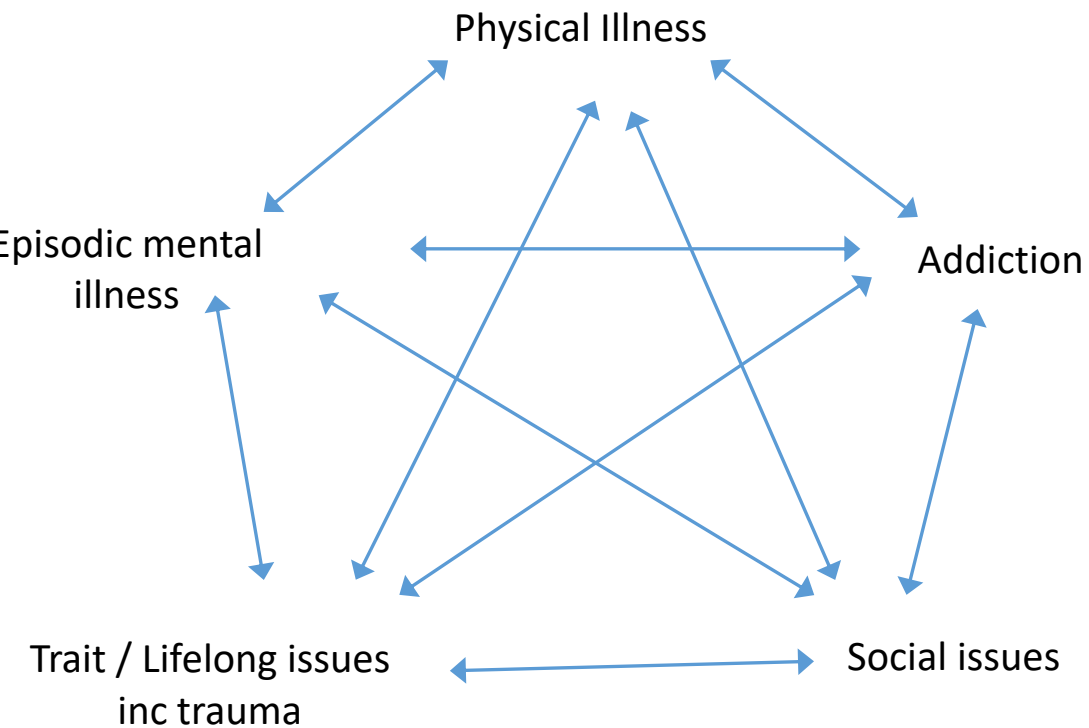
May 2021



# The Neighbourhood vision for mental health



# Our Aim – Moving from Web of Complexity to Web of Support



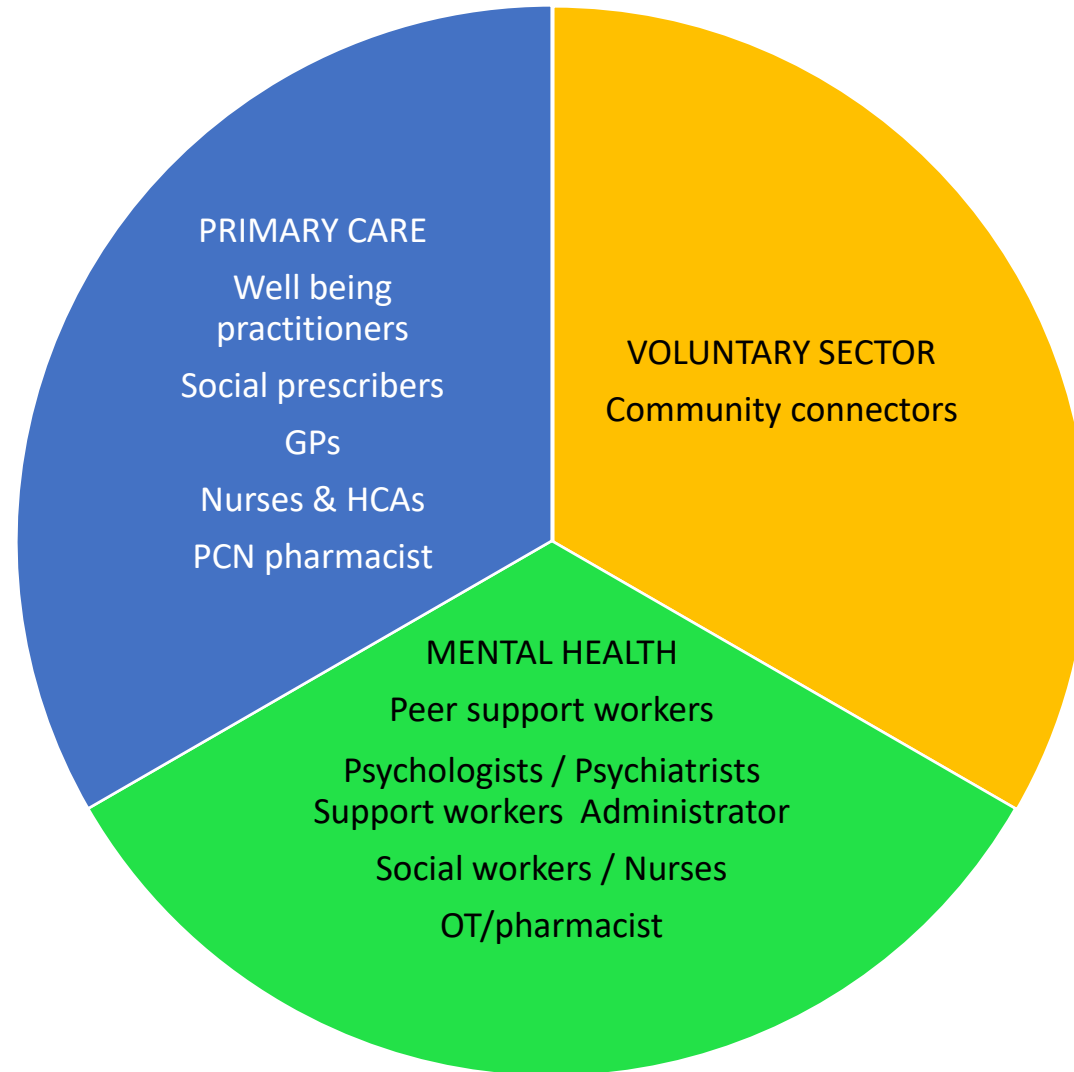
# By creating Neighbourhood Mental Health Teams

The Neighbourhood Mental health team brings together colleagues in primary care, the voluntary sector and mental health in one blended team.

We have 4 pioneers sites: Hackney Marshes, Clissold Park, Well Street Common & Woodberry Wetlands and plan to roll out to all neighbourhoods by July 2021.

The Wellbeing Network is our voluntary sector partner, providing community connectors and wider links.

Turning Point, Core Arts, Engage Hackney Housing and the Portman & Tavistock NHS Foundation Trust are all members of the team also.



# 1. A focus on what matters to the resident



- **Resident innovation club** formed so that residents co produce changes with services
- Residents co producing information, videos, pathways etc
- A range of **neighbourhood based activities** and clubs are being set up including cycling, football, table tennis, gardening and cookery
- **Dialog+ outcome tool** being used to ensure a focus on what matters to the resident
- Co produced recovery focused care plan will be used in the neighbourhood teams
- A new web and app based resident held record, called **Patient Knows Best**, being developed

## 2. A new flexible model of care focused on social factors



- Focus on **complexity and wider social factors** that impact on mental health – as well as diagnosis
- **Trauma informed care approach** and more psychological therapies in neighbourhoods
- A wider and more **flexible range of support**, where people can be flexed up into higher or lower levels of care
- Moving away from culture of closing cases so that people don't have to be re-referred but can access support quickly when it's needed
- People are offered support tailored to their strengths & needs rather than a rigid set of 4 contacts a year

### 3. An increased offer of community support



- **Community connectors** supporting people to make links in their neighbourhoods and access community and voluntary sector support
- A range of **new groups and activities** led by connectors, peer support workers, social workers, OT and psychology staff
- Plans to hold activities in **community halls and spaces** once Covid restrictions permit
- Forming more **partnerships with the voluntary sector** to co-design and deliver new services
- More integrated support available with health and social care partners via the Neighbourhood Programme e.g. the Neighbourhood Conversations, which bring together the community, voluntary and statutory sector partners

## 4. More support and blended team working



- Blended **neighbourhood team** includes voluntary sector, primary care, mental health and colleagues from other partners
- **Daily and weekly meetings**, as well as using MS Teams, encourages team members to talk to each other for support and joint solutions
- The ethos is about the team working together to come up with **formulations and support packages** rather than handing off to an individual professional
- **A wider range of support** is available such as pharmacy input



## 5. A more responsive service



- Residents are getting **faster and more responsive** service
- Daily meetings have regular input from wide range of team members including community connector, psychologists and doctors
- **GP able to drop into daily and weekly meetings** to discuss a referral for either supporting in the practice or accessing the team for more support
- Professionals from **the wider virtual neighbourhood team**, such as housing or substance misuse, can drop in

## Next milestones

- Expanding resident led activities as we come out of lockdown
- Continuing to develop the community offer, groups and activities with partners
- Roll out to remaining PCNs by July
- Developing the high complexity service
- Agreeing and implementing a new neighbourhood medical model
- Gradually moving across people from outpatients into the new neighbourhood teams
- Developing the neighbourhood psychological therapies partnership and model
- Race equalities work with partners
- 'Live well' task and finish group on personalised care
- Community connector procurement
- Evaluation
- Handover in September

# Learning

- Need to support community groups and voluntary sector to develop the community offer – exploring small grants
- Importance of OD and reflective space
- The tension of QI approach (ambiguity) and project plan (black & white)
- The tension between responsiveness & meeting burden
- Process outcomes balanced with relational outcomes
- The weight of process while trying to keep to the vision
- Impact of pandemic on inequalities
- Impact of pandemic burnout
- Increase in demand

# Feedback

'I thought the patient we discussed today in the daily blended team meeting was a good example of the blended team/neighbourhood doing a great job – in the past this man would simply have been 'rejected' by the secondary psychology service (SPS) and sent back to GP; but now with the new way of working I phoned him and discovered someone at risk of suicide in the near to medium term; we formed a plan, and I phoned him just now.

He was immensely grateful at having been thought about and for the plan we put in place. His mood has improved considerably as a result.

Worth it!'