



Joe Redmond: Managing Director North (Richmond Fellowship)

Tanya Samuels Insight and Evaluation Manager (Richmond Fellowship)

Supporting people in mental health crisis: an alternative



About Richmond Fellowship

- § Championing recovery & inclusion – 60+ years
- § Large voluntary sector provider of mental health services
- § A values based organisation (**Hope, Respect, Inclusion, Enabling**)
- § Work with 10,000+ people every year with 1100+ staff
- § More than 135 services (care homes to employment services)
- § Support to people in mental health crisis:
 - Ø crisis accommodation service
 - Ø safe haven services
 - Ø mental health support centres



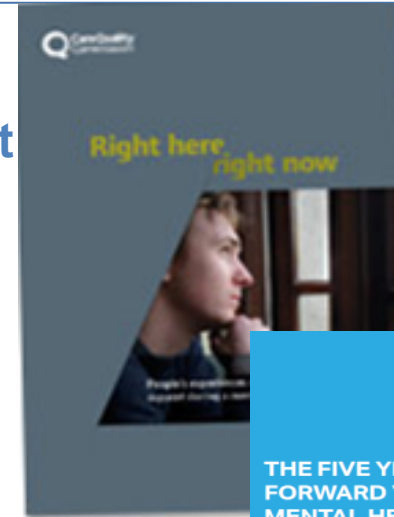
Lancashire Care
NHS Foundation Trust



**RECOVERY
FOCUS**

Drivers for change: political, social & economic

- § Transformation underway? acute mental health → early intervention/self management
- § Parity of Esteem: mental & physical health
- § Crisis Care Concordat (2014)
- § 62%↓ in MH beds (1987/88 - 2009/10)
- § CQC 2014 report 'system struggling to cope & lack of compassion from A&E staff'



A report from the independent Mental Health Foundation
February 2016



Lancashire Care
NHS Foundation Trust



RECOVERY
FOCUS

Drivers for change cont...

- § **50% ↑ in people presenting at A&E with psychiatric problems 2011-12 to 2015-16**
- § **Bed occupancy – 2015 study of in-patient beds 91% of trusts operate above recommended levels**
- § **High cost of in-patient units**
- § **Use of unsuitable services e.g. police facilities for people in MH crisis**
- § **Out of area placements (OAP) – associated with –ve patient experience & > risk of suicide**

OP79



Do the right thing:
how to judge a good ward

Ten standards for adult in-patient
mental healthcare

June 2011

OCCASIONAL PAPER

NHS

Lancashire Care
NHS Foundation Trust



Average cost of OAP £540 a day

**RECOVERY
FOCUS**

Drivers for change cont...

- § In-patient stays: disruptive & frightening
- § Study showed 16% of in-patients are clinically well enough to leave
- § CQC report - 42% received appropriate care in a crisis but staff 'uncaring'. People working in charities got most +ve rating
- § In-patient study - 56% said stay was not conducive to recovery & 57% didn't have enough contact with staff
- § Community crisis houses – perform better for satisfaction, autonomy & voice

theguardian

Almost 6,000 mental health patients sent out of area for care last year

NHS figures obtained by BMA show number being sent long distance for treatment in England rose 40% in two years



© The figures also reveal that £159m was spent on placing patients in out-of-area beds in 2016-17, up 47% on 2014-15. Photograph: Dana Neely/Getty Images

Almost 6,000 mental health patients had to be sent far out of their local area for treatment last year, with some travelling hundreds of miles, according to NHS figures.

Data obtained by the British Medical Association shows the number of patients with mental health problems travelling long distances for care in England has risen by 40% in two years.

In 2016-17, 5,876 travelled out of their area for treatment, compared with 4,213 in 2014-15.

NHS

Lancashire Care
NHS Foundation Trust



**RECOVERY
FOCUS**

Crisis houses in Lancs



Lancashire Care
NHS Foundation Trust

- § **2 5 bed crisis houses (Chorley and Burnley)**
- § **Chorley 6 bed – started in May 2017 (311 placements)**
- § **Burnley 5 bed – started in April 2018 (100 placements)**



**RECOVERY
FOCUS**

Richmond Fellowship Crisis Houses



Lancashire Care
NHS Foundation Trust

- § 8 crisis houses (CH)
- § 42 bed placements in RF CHs
- § Funding: LA & Foundation Trusts
- § Work closely with CHTT (referrals/support)
- § Rapid access & 24 hour support
- § > 10 days support



§ Support provided by recovery workers – not clinical



**RECOVERY
FOCUS**

Compliments

To all of the staff at Willow House

I just wanted to say thank you for all the support you have given me whilst I have been at Willow House. Not only have you helped me to try and see things in a different way, talked to me for hours when I felt at my worst, given me great advice that I can take home with me... You have also made me realise that there are some good people out there and that is a major thing for me.

I felt comfortable talking to you right from the start and you have helped me so much. Thanks for introducing relaxation to me, I have used it a couple of times when I have been struggling to help myself to calm down and it really helped. It is definitely a tool I will be trying at home and something I would never of tried if you hadn't of shown it me... again thank you!

You are amazing at your job and helping people so much and there is proof here in this letter. I never thought I would trust people in anyway ever again.

Keep doing what you are doing!



Lancashire Care
NHS Foundation Trust



**RECOVERY
FOCUS**

Thank you to staff at Willow House

I would like to compliment Willow House for the exceptional service the staff recently provided to one of my clients who was experiencing severe difficulties and distress resulting in the deterioration of his mental state. His living arrangements were also impacting his ability to make helpful choices with regard to his lifestyle.

On visiting my client, I was offered a full and comprehensive handover from the staff and was also provided with a plan of action that would be delivered to further help and educate him with regard to his living arrangements.

My client was able to see that by spending time at Willow House, his living arrangements were maladaptive in his ability to maintain a mental state at which he felt able to function at an optimum level. Staff at Willow House worked closely with him and supported him in filling out paperwork to find alternative accommodation. This appeared to move very quickly and my client was seen by a housing officer within five days of his stay.

Staff were very professional and kept in contact with me throughout the duration of my client's stay. I can honestly say he has benefited greatly from his time at Willow House and is now in the best condition he has been in a long time.

I wish to thank the staff at Willow House for giving my client this opportunity for enabling him to move forward in his recovery.



Our approach

- § **Opportunity to talk to trained recovery worker – when needed**
- § **Support to understand triggers of MH crisis**
- § **Support to develop coping strategies**
- § **Psychosocial support – understanding MH**
- § **Solution focused support – use of interventions**
- § **Develop self confidence/life skills**
- § **Ownership– driven by person's own goals**



Structure of support

- § Risk assessment by CHTT
- § Simple assessment in CH by recovery worker
- § Day 1: start support plan
- § Wellness Recovery Action Plan (WRAP)
- § Daily 1-2-1 from recovery workers
- § Daily CHTT support
- § Group support



§ Follow up



RECOVERY
FOCUS

Thresholds

- § **Thresholds for in-patients vary & change – due to complex & fragmented system**
- § **Depend on wider system issues & e.g. alternatives to admission & delays in entering & leaving hospital**
- § **Affected by community services, CHTT**
- § **In RF CHs (referrers said between 10% to 54% would 54% would go to hospital if CH not there)**

The Commission
to review the
provision of acute
inpatient psychiatric
care for adults

OLD PROBLEMS, NEW SOLUTIONS:
Improving acute psychiatric
care for adults in England

FINAL REPORT



**RECOVERY
FOCUS**

Crisis houses – advantage over hospitals



Lancashire Care
NHS Foundation Trust

- Shorter stays (average 6 days compared to mean of 32 days in hospital)
- Intensive support – available when needed (1-2-1 & group/peer)
- Less disruption to work / family than hospital admission
- More homely & comfortable than hospital
- Less stigma in a community service

“Knowing I could talk at any time about a situation or problem was great as the thought of bottling everything up could set me back.”



**RECOVERY
FOCUS**

Crisis houses – advantage over hospitals cont.

- Hospital stay can de skill people – e.g. manage medication/food
- Coping skills more effective if learnt in situations where they will be used
- Focus on coping/self management skills
- Flexible/adaptable & person centred support – staff have time to offer more structured support than staff in hospital



Lancashire Care
NHS Foundation Trust

**RECOVERY
FOCUS**

RF Crisis houses – what the data tells us...



Lancashire Care
NHS Foundation Trust

- 937 placements in CHs 2017-18
- 27% of people presented at A&E
- 66% women
- 26% - caring responsibilities
- 32% live alone
- 39% of referrers gave reason for entering CH suicide ideation
- 30% of referrers said if the CH was not there person would go to hospital
- 26% have CPA



**RECOVERY
FOCUS**

Crisis houses – what the data tells us..

- 40% have seen a CPN in <12 mnths
- 18% been in patient in < 12 mnths
- 28% diagnosis of depression & anxiety
- 20% have diagnosis of personality disorder
- 11% have no diagnosis
- Staff provide support in average 3 areas
- 9% of people used CH more than once
- 6% transfer from CH to hospital



NHS

Lancashire Care
NHS Foundation Trust

**RECOVERY
FOCUS**

Crisis houses interventions

Individual (1-2-1)

- Mindfulness – body scanning, breathing strategies
- Mood diaries, +ve & -ve thinking, balanced thinking
- Worry charts, anxiety graded exposure
- Emotional thermometer
- Distress tolerance
- Taking back control
- Confidence mind maps
- Sleep hygiene
- Problem development
- Healthy relationships



Lancashire Care
NHS Foundation Trust

**RECOVERY
FOCUS**

Crisis houses interventions

Groups

- Food & mood
- Relaxation
- Managing anxiety
- Thinking patterns
- Emotional jenga
- Good sleep practice
- Music & mood



NHS

Lancashire Care
NHS Foundation Trust

**RECOVERY
FOCUS**

Outcomes

Support area	Need support	Given support	Better able to manage need
Managing anxiety	63%	84%	73%
Low mood	60%	82%	72%
Sleep	56%	86%	74%
Building self confidence	47%	74%	65%
Managing emotions	42%	78%	65%
Social isolation	36%	82%	73%
Understanding MH	33%	91%	80%
Life skills	31%	95%	86%
Relationships	30%	90%	82%
Managing self harm	28%	70%	55%



**RECOVERY
FOCUS**

Exit Survey results 2017-18

	Strongly agree or agree
It was an environment where I felt safe & secure	93%
Staff treated me with dignity & respect	94%
Staff helped me settle & feel at ease	90%
Staff maintained regular contact & offered regular support	84%
Support focused on my individual needs	84%
Staff helped me think about what triggered my crisis	80%
Staff helped me develop coping strategies	82%
I worked with staff to set goals for my time in CH	79%
I achieved the goals in my support plan	64%
I was signposted to other agencies	78%

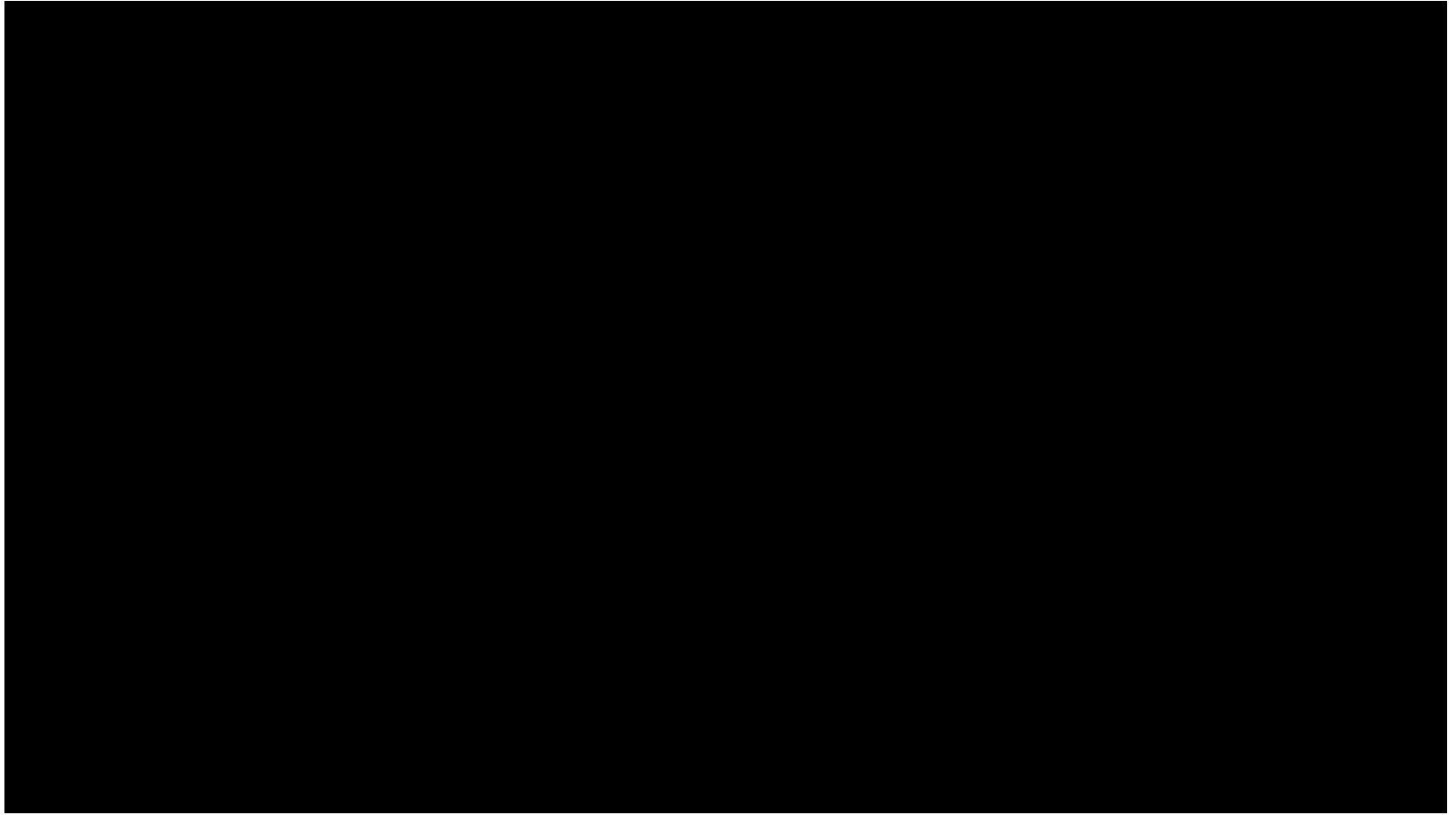


**RECOVERY
FOCUS**

The next steps

- To work more effectively with families to support people's recovery
- More structured approach to peer support
- To develop other models of crisis support e.g. Safe Havens
- Commissioned external research – Edge Hill University





**RECOVERY
FOCUS**