

**RECOVERY  
FOCUS**



How the voluntary sector  
collaborates to help people get the  
right help in a crisis

**RECOVERY  
FOCUS**

**RICHMOND  
FELLOWSHIP**   
MAKING RECOVERY REALITY

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# About us

Richmond Fellowship is part of Recovery Focus:

- Group of expert charities being built to inspire individual recovery nationwide
- Collectively more than 200 years' experience of providing complex mental health and substance misuse services
- Working with the people we support as equal partners to design, plan, provide & evaluate services together

# About us

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# Crisis

**“When people are in crisis they are at their most vulnerable. It is essential that they receive the care and support they need as quickly as possible, in a place they can feel safe, and that they are supported by people who understand their needs”**

# Our model

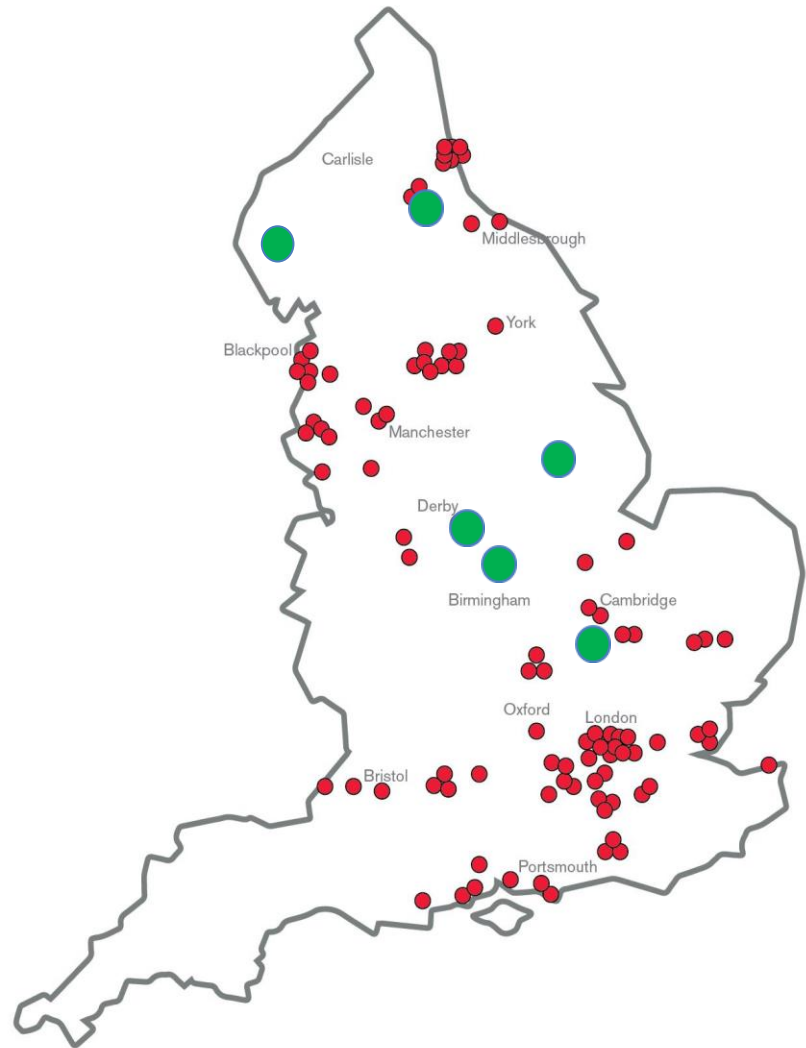
How we provide support in a crisis

- Person-centred, non-judgmental approach
- Recovery focused tools and interventions
- Recovery workers available 24/7 with close liaison with NHS clinical teams
- High quality 'hotel style' accommodation
- Ability to understand and work with complexity

# Crisis support

## Where we provide crisis services

- Cumbria
- Derbyshire
- Leicestershire
- Lincolnshire
- Redcar + Cleveland
- Milton Keynes
- Sussex



# 3 case studies for you

- **Alternative place of safety, Sussex**
- **Trevayler, Derbyshire**
- **Box Tree Farm, Leicester**



# Painting the picture

## Sussex

- In 2013/14 **1,355** people detained under s136
- 500 went to a health based place of safety
- **63%** - would have gone to a police cell
- Home Office commission a pilot in Nov 14
- RF's **alternative place of safety** goes live in Mar 15
- Over a 12 week pilot we help **7 people**

# What is unique about us

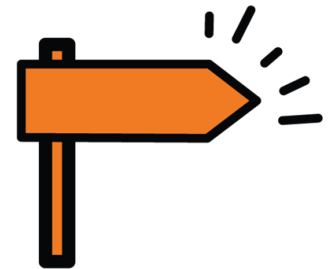


- Willingness to invest
- Ability to integrate well with partners
- Genuine co-production
- Staff skills-mix
- Evidence base

# Why the Sussex pilot was a success?

## We were not alone

- ✓ Sussex Police,
- ✓ Sussex Partnership NHS Foundation Trust,
- ✓ NHS England South East Strategic Clinical Network,
- ✓ West Sussex County Council,
- ✓ NHS Horsham and Mid Sussex CCG,
- ✓ South East Coast Ambulance Trust
- ✓ South East Commissioning Support Unit



# Why the Sussex pilot was a success?

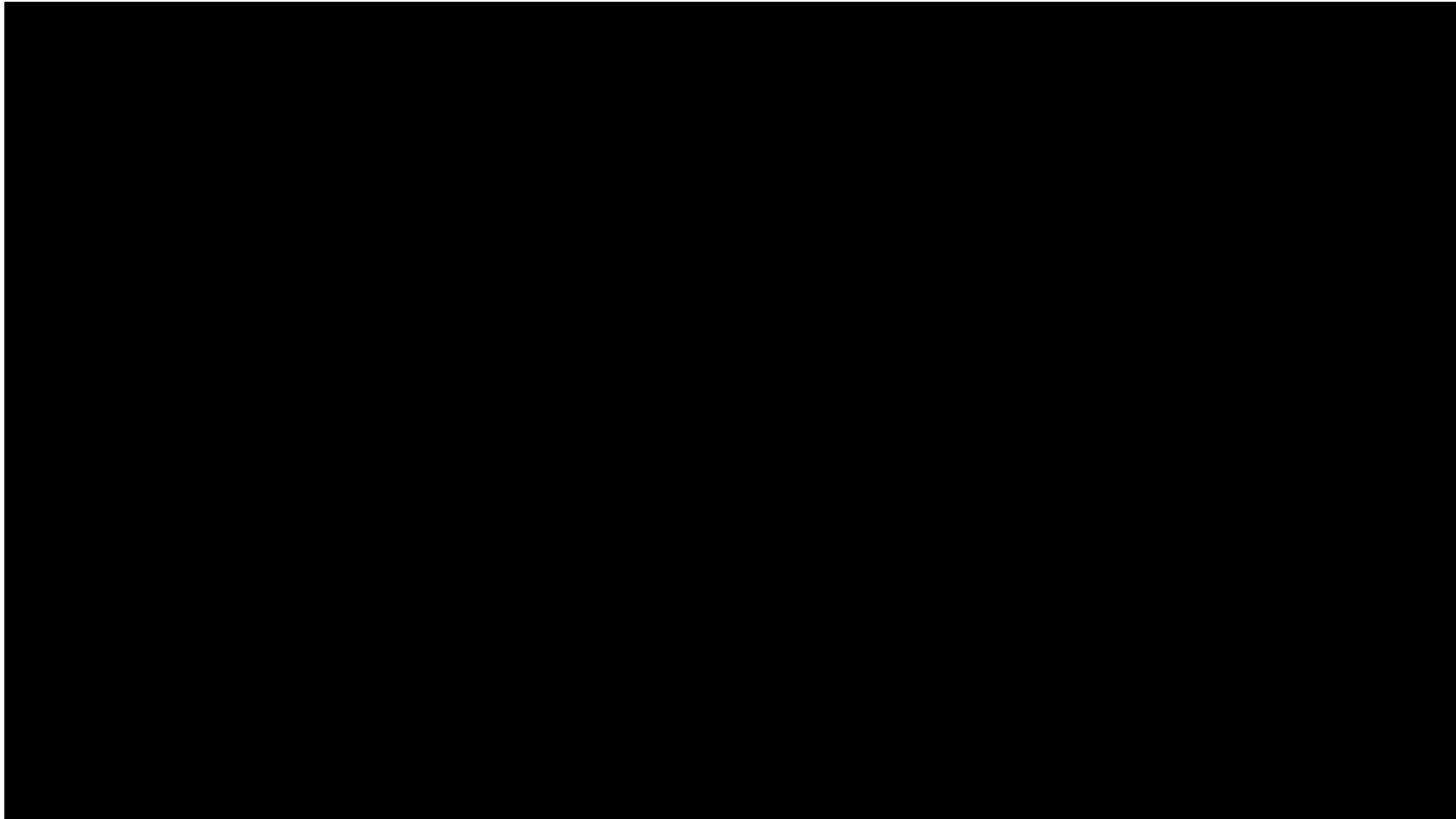
- ✓ development of an agreed, workable protocol based on good practice standards
- ✓ demonstration of collaboration between partners
- ✓ no incidents in the APoS
- ✓ no complaints received
- ✓ police able to leave within 30 mins
- ✓ police not recalled to APoS
- ✓ positive feedback from those detained
- ✓ positive feedback received from staff





Anne is 33 and has recently lost her job as a receptionist. A victim of domestic violence, Helen was fearful of the consequences and so drank a bottle of wine and went to the railway tracks with the intention to end her life.

A member of the public called the police and Helen was detained under section 136. Helen has had no previous involvement with mental health services.



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# Case study 2: Trevayler

## Our Derbyshire service

- 4 bedded house
- Admissions via referrals from the local NHS crisis resolution team
- 24hr access to a place
- Maximum stay up to 14 days, typically 3-5
- Home treatment team visit daily

# Reasons for admission:

Low mood	44
Suicidal ideation	43
Deteriorating home/family situation/relationship problems	27
Increased risk of serious self harm	22
High anxiety	22
Sleep disorder	22
Persecutory auditory/visual hallucinations/paranoid or delusional thoughts	15
Eating disorder	14
Self neglect	11
Other	4
Chronic pain	2
72-hour assessment	1



# Types of diagnoses:

No diagnosis currently	18
Depression (not psychotic)	14
Personality Disorder	9
Anxiety	3
Schizophrenia	3
Diabetes	2
Adjustment disorder	2
Asperger's	1
Schizo-affective disorder	1
Other psychosis	1
Eating disorder	1
Rheumatoid arthritis	1
Unknown	1
Missing	1
Total	58

# Independent evaluation:

- 90% of people leave our service in a planned way
- Only around 12% have required an in-patient admission
- Commissioners, clinicians and people we support all rate the service as high quality
- We provide an important part of the local mental health system and suicide prevention strategy

# Case study – Trevayler Crisis

LP was a young mother with a history of overdose and a diagnosis of Emotionally Unstable Personality Disorder with Co-morbid Depression.

LP was initially admitted at the Royal Derby Hospital however 1 day later she discharged herself. After a second assessment with the Crisis Team LP agreed to be admitted to Trevayler for a period of intensive support and on going assessment

# LP Outcomes

- When writing LPs support plan it was identified that she suffered with almost constant agitation & anxiety.
- LP reported on a number of occasions that she'd found the experience incredibly useful, particularly because the team had been able to dedicate time and resources in a peaceful, therapeutic environment that had been so unlike her experience at hospital.

# Case study 3: Box Tree Farm

## Our Leicestershire service

- 6 bedded house
- Crisis helpline and drop-in
- Funded by Leicestershire Partnership NHS Trust
- Part of local Better Care Together initiative aimed at shaving £400m off the cost of health and social care by 2019



# Early outcomes

- 50 people used service in first 3 months
- 91% said the environment helped them feel at ease
- 94% said they were able to maintain their independence

“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.”

# Box Tree Farm Case Study

- KH was admitted to Box Tree following a relationship breakdown, without a home and unable to have access to his child.
- He had to take time off work due to his poor mental health which contributed to his diminished self-esteem
- KH attempted to take his life and was referred to the Crisis Team.



# Box Tree Farm Case Study

- KH identified several goals he would like support with and they were factored into his support plan.
- He was given space to talk about his emotions at Box Tree, he was encouraged to consider positive aspects of himself and to develop these into positive affirmations.
- When KH was discharged he reported positive feelings for the future and no longer had the intention to take his own life. He also offered to volunteer at the service.

# Over to you...

Any questions?

