

## Improving Mental Health in Portsmouth - workshop two results

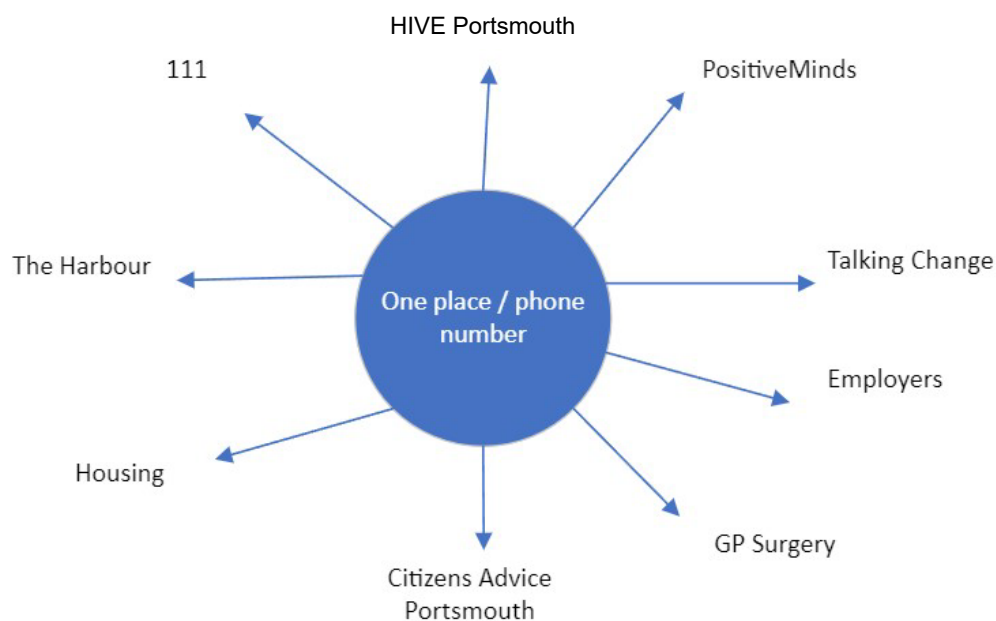
### The workshop:

Workshop two was delivered across three locations in Portsmouth: Portsmouth Central Library, Cosham Community Centre, and The Holiday Inn Hotel in Southsea. Attendees included people with lived experience, carers, and staff from across Health and Social Care.

Attendees were reminded about the purpose of the Improving Mental Health in Portsmouth project, including the background and context of the Community Mental Health Framework. The scope of the workshop was specifically focused on "access and short-term support", some supporting diagrams were provided to support attendees with answering the questions.

Attendees were sat in groups and discussed three questions. Facilitators supported their discussion and took notes to ensure all feedback was captured.

The feedback captured at these workshops is below. The project group will analyse this feedback and use it to form the basis of the discussion for the next workshop, due to take place in July.



**Question one:**

- Who would be able to access this “hub”? All ages? People needing support/ professionals/carers?
- What “experts” would you want to be in the “hub”? What would their role be?
- How would you expect to find out about the “hub”?
- What would we call this “hub”?
- When would people be able to access support? Before, during, after treatment?
- How could access be made? For example, phone, instant messenger, text, email, enquiry form (similar to e-consult)
- What would you expect the "hub" to do?
  - Connect you with the right support (not signposting)?
  - Book an appointment?
  - Be able to check on progress (if on a waiting list for example)?
- What times would you want to be able to access the "hub"?

**You said:**



**Question two:**

Exploring what best supports people between appointments or whilst awaiting treatment...

- What could the hub offer?
  - Advice and support line?
  - Updates on progress?
  - Link in with support services whilst waiting?
- Where might a digital offer work best?
  - Who for?
  - What could be on there?
    - Is it individualised or a virtual hub with information?
    - A bit of both?
    - Maybe an “uber type” update service?
    - A place to store care/support plans?
    - A platform that loved ones and professionals can access information you wish to share?
    - What might be the opportunities and benefits?
    - Are there any risks?
- What other options might there be during your journey?
  - A peer who supports alongside the persons journey?
  - Workshops?
  - Online courses?
  - Carer’s support?

**You said:**



**Question three:**

Appointments and transitions...

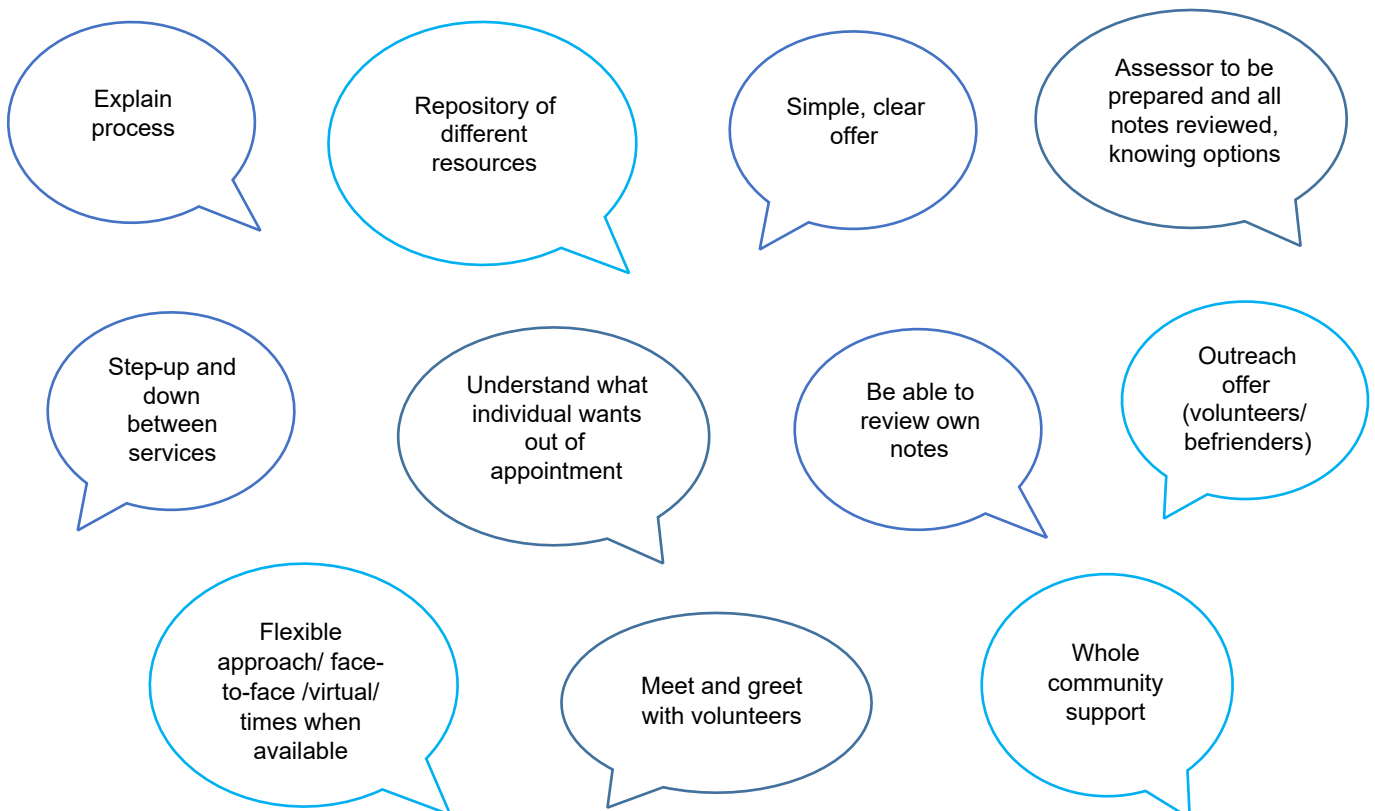
**Principles:**

- I have a choice of where and when an appointment happens.
- I own my own care plan and can decide what to share and with who.
- When I am seen, I leave with a plan in place for my next steps - I am not just signposted.
- I am prepared for the appointment and know what to expect.
- The person I see is compassionate and demonstrates this.
- The “staff member” collaborates with others supporting me.
- I am able to be seen by an “expert”.
- The person seeing me is prepared for the appointment.

**Questions:**

- How would the person like to be engaged with? - face-to-face or virtual?
- How would the person be provided with options on ways of contact?
- How do we create a flexible approach that ensures each person is given the information they need in order to step forward with confidence?
- Who is an "expert"? What makes them an "expert"?
- What would need to be different within existing services to meet these principles?
- How would other services link in with the "hub"?
- If the person holds their own care plan, what would be shared with staff?
- How could services link together in a way that is more seamless for those using services?

**You said:**



## **Other feedback captured:**

### **Question 1 - The Hub**

#### **Who would be able to access this "hub"?**

- "Press one for... (carers, children and young people, adult mental health)
- Flexible for age ranges
- Don't exclude substance misuse or alcohol
- All ages
- Parents/guardians
- Professionals
- Carers
- Start with 16+ then expand once established
- One point of contact for life
- GPs can also use

#### **What "experts" would you want to be in the "hub"? What would their role be?**

- Skilled listeners
- Compassionate
- Kind
- Hold in the moment
- Validate
- "What's going on"/ "What brings you here today?"
- "Why now?"
- Train good staff who feel like they're making a difference and are supported to stay well in themselves
- Provide continuity
- Empowering, encouraging
- Informed
- Role play in individuals' journey
- Trained in customer services, empathy and personable skills
- Honest
- Hopeful
- Values-based
- Allows time
- Navigation/peer roles
- Trusted assessor
- Social Prescriber
- Mental health directory
- Knowledge on local resource
- Range of experts
- Someone who understands risk

### **How would you expect to find out about the "hub"?**

- Google analytics to find out what words people search for
- Social media
- Promotions
- Website
- GPs
- Targeted comms
- Schools/Universities
- Social media/influencers
- Visiting communities and faith groups
- Gradual roll out
- Shopping centres
- Libraries
- Superstores

### **What would we call this "hub"?**

- Single point of access "SPA"
- "Help me"
- "What's up? Network"
- "Your Mental Health"
- "Connect Portsmouth"
- Has to include "Portsmouth"
- "Hub" - Doesn't describe what service is
- "Portsmouth Mental Health Support Line"
- "Wellbeing and mental health support"
- "The feeling fine centre"
- "Portsmouth Reach mental health helpline"
- "Mental Health Navigation Point"
- HELP - 1,2,3,4
- My Mental Health - Portsmouth
- Mental Health Now - Portsmouth
- Portsmouth Mental Health Now!
- Mental Health Helpline
- My Mental Health
- MH Help
- MH Now

### **When would people be able to access support?**

- Accessible times
- Evenings and weekends
- Data driven hours
- Early mornings
- Direct phone line connecting to crisis phone lines such as The Harbour
- Open access and outreach
- Immediate access/drop-ins
- 24 hours, 7 days a week
- Better access for those working
- Timely 'now' offer
- Expectations on response times
- Not 09:00-17:00

### How could access be made?

- Free to call or can request call back
- Online chat
- Physical space for those without phone access (adults only)
- When calling GP - "Press one for mental health"
- Text, video call, Artificial Intelligence chat bot
- Out of office message, ability to leave message
- One number
- Physical and virtual offer
- Pop-up hubs across city
- Digital - website
- Social media
- YouTube films
- Digital apps (what is already available)
- Zoom
- E-consults

### What would you expect the "hub" to do?

- Person leading their care
- User friendly with copies of blank assessment forms so know what to expect
- Translation services and website information
- Tea/coffee/food
- Relaxed space, safe, neutral, not clinical
- Provide a summary of actions
- Refer with me, not for me
- Information on what to expect for appointments and referrals
- Simple triage - trauma informed
- Clear expectations
- Support whilst waiting
- Increase awareness of social prescribers
- Support to reintroduce to services, repair relationships
- Explore options with individuals
- Space for professionals to network and integrate
- A route into multi-disciplinary teams
- VPP - Vulnerable People's Panel
- Creative solutions
- Use of community spaces with a rota
- Include health and social care
- Ability to connect to the right service
- Support for carers
- Warm transfers, not sign-posting
- One assessment form for all
- Identify a plan
- Get an appointment
- Condensed triage tool
- Samaritans approach
- Call - listen - plan agreed - move on
- Right questions asked to get to the nub of the problem

## **Question two - exploring what best supports people between appointments or whilst awaiting treatment**

### **What could the "hub" offer?**

- Other services whilst waiting
- Phone
- Peer support
- Local resources in own neighbourhood
- PositiveMinds model
- Ongoing communication
- Specialist teams for excluded groups
- Websites - HIVE, Solent Mind, Talking Change
- App - access to care plans, journal, linked up
- Advocacy
- Police information
- Safeguarding
- Multi-Agency Safeguarding Hub
- Peers
- Clear plan of support whilst waiting for appointments
- Facebook and sharing stories
- Information for carers and family
- Clear questions to identify who you are
- Taster sessions for groups
- Prepare young people for work
- Align communication between services
- Preparation support for appointments
- Check-ins whilst awaiting appointments
- Walk through to services
- Peer support to hold cases
- Opportunity for staff to rotate to remain fully informed
- Support during recovery
- Supported to make a plan

### **Where might a digital offer work best?**

- Don't have to speak to someone
- To track progress
- Access to care plans
- To speed up processes
- Increased sense of control
- To book online sessions
- E-forums
- To access virtual peer support
- Self-led tools to help 'me' stay well
- Kooth for young people
- For use of reminders
- Provide guides on what to expect
- Options at end of call, like reminders, keeping in touch
- Completion of paperwork online
- Recording outcomes
- To widen access times
- Choice on contact methods
- Emails to contain useful information



- Aftercare
- Hold information in one place
- Videos, topics
- Subtitles
- Sign language

#### **What other options might there be during your journey?**

- 'Shiny Minds' app for staff
- Make use of what is out there
- Experts by experience network to look through apps and score them to create rated pick 'n' mix of choice
- Podcasts and other resources
- Online resources - library/counsellors
- 'What's up app'/messenger/tracking apps
- Drop-ins
- Groups
- Peers
- Link with recovery college
- Leaflets
- Offline tools
- Packs
- DVDs
- Recordings
- CDs

#### **Question three - Appointments and transitions**

##### **How would the person like to be engaged with?**

- Change the wording - not a "care plan"
- Volunteers to meet and greet
- Access online from different services
- Consent to share
- Opt-in/out of data sharing
- Telephone
- Drop-in
- Online

##### **How would the person be provided with options on how to contact?**

- Table options to tick pre-appointment
- Ask preference for comms and give choice
- Ability to contact hub for updates/information on transitions

##### **How do we create flexible approaches that ensure each person is given the information they need?**

- Understand why person is asking the question
- Repository of different resources
- Informed choices on what is available
- Simple, clear off that is specific
- Clear case notes
- Share what is needed to know
- Sharing information between services
- Recap information, opportunity to clarify

- Be able to review own notes, can suggest changes
- Portal to message key worker directly

### **Who is an "expert"?**

- Ensure clinical supervision
- Prepared, notes read
- Remove the term "expert"
- Understand my needs
- Experienced
- Values
- Peers
- Training
- Compassion
- Listening skills
- Navigation support
- Power imbalances - use of word appointment and expert
- Better people skills
- Give people a choice of who to talk to
- Friendly, helpful
- Pharmacist technicians - link to pharmacies

### **What would need to be different with existing services to meet the principles?**

- Use the "hub" to be more informed and updated about what is happening
- Videos of spaces, bio of person
- Outreach offer using volunteers, befrienders, digital support, transport

### **How would other services link in with the "hub"?**

- Consent to share
- Provide chance to complete information before attending the appointment
- Sign-up of services to "hub" to cut out transition steps
- Step-up and down
- Regular forum for professionals
- Share lessons learned
- Opportunity to shadow other services
- Terms of reference

### **How could services link together in a way that is more seamless for those using services?**

- Access to all patient notes
- Better use of peers/volunteers, passing on to those people who need to talk
- Differing services offering input to "hub"
- Library of resources for pre-assessment
- Trusted assessor from the hub