

Welcome!

Welcome to the very first edition of the ACOMHS newsletter! At ACOMHS, we aim to promote an inclusive, interactive approach to quality improvement and we hope that the newsletter will be one way to share developments, knowledge and ideas with your peers. We value your input, so if you have any comments or suggestions on what you would like to see in this newsletter, contact the ACOMHS team on the details below.

It has been an exciting year for ACOMHS, many teams have been going through the self review and peer review process for the very first time. The standards have recently been revised following our pilot phase and recruitment for the full programme will begin shortly!

If you are part of a team that is going through the self and peer review process, remember that ACOMHS is here to help. If you have questions, then please do get in touch. You can also ask your peers questions—see page 7 of this issue for more information on the ACOMHS discussion forum.



ACOMHS—My experience

Mary Rodgers, Carer Representative

The first ACOMHS experience took place in Belfast, Northern Ireland. I was nominated to be part of the review team in the carer role. As I live near Woodbridge in Suffolk the ACOMHS Project Team organised my travel to include a flight from London City Airport with an overnight stay in a new hotel in Belfast. The review team of 4 were able to meet the evening before over a meal, to get to know each other and to finalise our arrangements for the review the following

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day for North Belfast's service. In essence the review went according to plan and I understand that the staff and patients found the review to be beneficial, helpful and non-threatening.

I very much enjoyed meeting the patients and carers and talking to them about their experiences of the Belfast Service. This service also supports both patients and carers to articulate their views and to participate in improving and shaping the service by employing peer support workers, a system which seems to be highly effective. Previously before ACOMHS I have undertaken many peer reviews for the MSNAP (Memory Services National Accreditation Programme) Project Team and it is a common theme that patients and carers really do appreciate being part of the review process and feel valued that their views are taken into account. This same theme was echoed in the second ACOMHS review which I undertook in London. Although London is just a day trip on the train for me, all the travel arrangements were organised by the ACOMHS Project Team and the train tickets were provided well in advance of the review. Hackney and Belfast are very different services serving very different geographical and demographic populations but they both have the same aim and vision for their service users and carers.

For any carer or patient wanting to participate in these reviews, I can thoroughly recommend trying it as it is always a very rewarding and positive experience.

ACOMHS does more than just accreditation

The ACOMHS team

Accreditation for Community Mental Health Services (ACOMHS) was developed because of the demand from staff working in community mental health settings. Although there were quality improvement programmes at the College for other mental health services, no such programme existed specifically for community mental health teams. Although the overall goal of accreditation programmes like ACOMHS is to get accredited, this is very much the 'icing on the cake' of the whole experience. Rather, ACOMHS' ethos is to improve the quality of care provided in services, which is a process that is continuous and ongoing as no service is ever going to be 'perfect'. As an ACOMHS member you are part of a network of people who are dedicated in raising the standard of care. As the programme grows it will provide an increasing number of opportunities to share good practice through a variety of avenues such as different events, facilitating email discussion groups and organising peer reviews so staff can visit other teams. It is important to remember these opportunities are available to ACOMHS members before and beyond the point of accreditation. The ACOMHS project team wishes to work with its member services in a supportive and non-judgemental way and support services with their ongoing improvement, as well as helping them to reach a standard where they can be awarded accreditation.



A Day in the Life of a Mental Health Nurse

Norman Young

1) How did you become a Nurse?

I entered mental health nursing 1991 after studying Biochemistry and Psychology at Keele University. Whilst I did not have clear plans for a career in mental health nursing I had become interested in mental illness and felt this was the right direction for me. I relocated to Cardiff and completed my professional qualification in 1994. After a year as an inpatient nurse I began work as a community nurse and did so for ten years after which I moved in to a clinical academic role and now work as a Nurse consultant for First Episode Psychosis.

Whilst as a community mental health nurse I trained in cognitive and behavioural therapies in the treatment of anxiety, depression and psychosis and family interventions for psychosis. This led me to become a lecturer practitioner with Cardiff University and with colleagues I developed educational courses in this field in particular the setting up of a Thorn Initiative site in Cardiff.

My subsequent clinical academic posts have allowed me to work on a number of national programmes that have focused on the provision of services for people with psychosis in the community. For example being an expert advisor for NICE and working with the Royal College of Psychiatrists and the Accreditation of Community Mental Health Services programme.

2) What is the role of a Nurse in a CMHT?

Community mental health nurses tend to have a broad knowledge and skills set with some nurses going on to develop a specialism. They are often asked to undertake high volume work assessing referrals from primary care alongside meeting the

needs of people with complex and enduring mental health conditions. A key role for community mental health nurses is to provide outreach, practical help and psychological therapies to difficult to reach groups of people including their families and carers. Finally, a key feature of a team is that no one person can sufficiently meet the needs of the patient; consequently care and treatment needs to be coordinated. Care co-ordination has been a responsibility of mental health nurses for many years and the necessary transactional skills are highly valued by patients and colleagues .



3) What's involved in a typical day?

I have two clinical days in the week working with people with psychosis providing or negotiating treatments and care for them. I also offer consultation to staff on complex issues and on service organisation and delivery. I have one day of the week with Cardiff University teaching on undergraduate and postgraduate programmes and developing teaching innovations. I have one half day for research and act as a principle or chief investigator on projects. The remaining time is for service development and quality improvement. Currently first episode psychosis and non-medical prescribing.

A typical day? If it is a split day such as today I have

met and liaised with colleagues to redesign the electronic patient record so that it is better able to record and support staff in the delivery of psychological therapies. I have gone back to my desk and worked on tasks related to research governance and the design of our first episode psychosis services.

In the afternoon I meet a 20 year old man thinking about returning to University but is worrying about how distracting his voice hearing is. I have started a worry intervention package with him. Later I meet up with a community nurse and provide family intervention to a 19 year old woman and her mother who are adjusting to the impact of psychosis. It is then back to the office to write up the notes and take a call from a student nurse.



4) What's the most rewarding part of your job?

I think I am like most people working in health and social care who will say that meeting people in distress and thereafter working with them to resolve their problems can produce some of the most rewarding experiences from work.

5) What's the least rewarding part of your job?

One gripe I have is our IT infrastructure which makes it difficult to engage effectively with young people through social media and the web.

Many thanks to Norman for his interesting insight into what it's like to be a mental health nurse!

Dates for the diary

Peer reviewer training

We will be holding the following peer reviewer training days in 2016/2017:

Monday 19th December 2016 (London)
Tuesday 6th June 2017 (London)

These training days are for staff working in ACOMHS member services.

ACOMHS are also looking for service user and carer representatives to join the network as peer reviewers.

To register for any of these training days, to find out more about what becoming a reviewer involves or to put forward any interested service users or carers please contact Amy.colwill@rcpsych.ac.uk

First ACOMHS National Forum

The very first ACOMHS National Forum for Community Mental Health Services will take place in London On Thursday **13th April 2017**. ACOMHS members are entitled to 2 free spaces!

The forum is shaping up to be an exciting day with a variety of talks looking at all aspects of community mental health care.

Please save the date!

North Belfast Community Recovery Team

Carers Assessment and Support

The North Belfast Community Recovery Team have recently developed a ***Carers Assessment and Support Programme***. Feedback from carers had suggested a need for more consistent provision of information to them, particularly regarding medication, symptom management, practical support and services available locally. The ACOMHS self-review process had also highlighted a lack of consistency in how this information was delivered to carers and the need to systematically record this.

To address these needs we established a project team with the aim of developing an assessment and support programme that fully met carers' needs. The project team was comprised of 8 carers, a peer support worker, 2 community psychiatric nurses and a social worker who met on a regular basis and consulted with carer's groups throughout the process. This was facilitated by Carers Advocates who work closely with our team: Mrs Eleanor McMullan (Praxis Care) and Mrs Angela Meyler (CAUSE). Current processes, documentation and legislation were reviewed. Through this process we identified the following areas for improvement:

- a need for practical information on symptom management and crisis planning
- increased awareness regarding medication and side effects
- dedicated time for carers in the initial assessment of all new referrals
- a need for more information in written form
- a need to increase awareness regarding structure of our mental health service
- a need to provide carers with information and support to maintain their own mental health and well being

As part of the development process training needs were identified for our team. The Belfast Trust Service Improvement Manager, Mrs Margaret Woods worked with the project team to develop an educational programme delivered jointly with carers to staff. This programme includes education around carers' needs, relevant legislation and professional guidance on confidentiality for all staff. All members of our team have recently completed this training and the course now features on our Recovery College Prospectus of courses which are open to all service users, carers and staff.

To date we have commenced implementation of a number of changes to our carers' assessment process including providing dedicated 1:1 time for carers to meet with the service user's own keyworker and the introduction of a self-assessment questionnaire for carers. This questionnaire assists in the identification of the carer's specific needs in order to better tailor support to meet these. A carers' pack has also been introduced which includes: a directory of available services locally, a guide to the structure of our service with contact numbers, written information on crisis management, medication, supports and benefits, and advice for carers on maintaining their own health and well-being. All carers are now offered a carers' assessment within 4 weeks of referral. The development process is ongoing and we are currently working to ensure consistent delivery of all elements and are developing a database of our carers. In addition, we plan to implement a review of carers' needs every 3 months to be done in conjunction with the service user's care plan review.

Feedback from carers has been positive to date. Praxis Care Carers Advocate, Mrs Eleanor McMullan has contacted carers for feedback. In particular, they have highlighted that the self-assessment questionnaire has helped increase awareness regarding the time dedicated to their caring role and reminded them to take time-out for themselves. The knowledge that the keyworker is available to carers should they need to discuss any fears or problems is also very valuable. Carers also emphasised the importance of Carer Advocates being available to them as this helps relieve isolation, provides 1:1 support, information about respite opportunities and the opportunity to meet with other carers. A Short Breaks Programme for carers is also co-ordinated by Carer Advocates and this includes theatre trips, dinner and lunch trips, overnight stays and stress management courses.

More information about the voluntary organisations referred to in this article are available at:

<http://www.praxisprovides.com/> (Praxis Care)

<http://www.cause.org.uk/> (CAUSE)

East Caradon Community Mental Health Team

Mental health awareness through radio



In the East Caradon Team, we have actively participated in a BBC Radio Cornwall phone-in programme. This is a collaboration between the Cornwall Partnership NHS Foundation Trust and BBC Radio Cornwall for a live phone-in programme on mental health issues.

The programme broadcasts once a month and has now been going for six years. Each programme is on a specific topic and members of the public phone in with their experiences and questions.

Topics have included psychosis, bipolar disorder, depression, personality disorder, suicide, violence and mental health, women's and men's mental health and promoting good mental health.

Each programme has a medic and non-medic clinician responding to caller's' questions. Several members of the CMHT have participated and enjoyed being on the programme, and we feel it has made a significant contribution to public mental health education and promoting good mental health.

We also promote self-referral to the CMHT. Whilst this has some shortcomings as criteria are for severe mental illness for treatment from the CMHT, it does mean that patients are not restricted to persuading their GP to refer them if they feel they need an assessment.

ACOMHS Chat discussion forum

ACOMHS chat is an email discussion forum for anyone who works in a member service. It is a group designed for you to ask your peers questions, troubleshoot and problem solve, share ideas and good practice and keep informed about events and publications.

It can also be useful if you wish to discuss the ACOMHS process with your peers—do you want to know how other teams are managing the self review process? Do you have any good ideas to share or questions to ask? Do you need advice on how to meet a standard?

Email 'JOIN' to ACOMHS-chat@rcpsych.ac.uk

Contribute to the next newsletter

One of the benefits of membership is the opportunity to share good practice with other ACOMHS members. We wish to continue to include examples of good practice from members within future newsletters. If you have ideas for future articles you would like to see included in our newsletter please do not hesitate to contact us at acomhs@rcpsych.ac.uk

Contributions could include a written piece or even sending us a photo!

Many thanks to everyone who has contributed to the first ACOMHS newsletter!



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