"I TURNED MY LIFE AROUND"

TRACEY WANTS TO INSPIRE OTHERS TO MAKE POSITIVE CHANGES TOO

NEW MOTHER AND BABY UNIT FOR THE REGION

IT WILL OFFER SUPPORT TO NEW MUMS WITH MENTAL HEALTH ISSUES FROM ACROSS EAST ANGLIA
We would never have got where we are now without their help. "Mental illness happens indiscriminately. But our story shows that you can get through it." We are now without their help. "I'm proof that there is a happy life after domestic abuse." I was strong enough to turn my life around and be a better person. "Talking has helped me.

Norfolk and Suffolk NHS FT (NSFT)
New unit to provide specialist help close to home

New mothers with serious mental health problems will soon be able to receive specialist inpatient help closer to home when NSFT opens the region’s first dedicated mother and baby unit next spring.

Image of Jessica Bannister, read her story on page 6 >>

The eight-bed unit, which will ensure mothers and their newborns can stay together while the mother is receiving acute psychiatric care, will open at Hellesdon Hospital in Norwich. It will care for women with illnesses, such as postnatal depression and severe anxiety, as well as postpartum psychosis—a serious condition which can occur a few days after a woman has given birth and causes hallucinations and delusions while severely disrupting perception, thinking, emotions and behaviour.

The unit will cost around £3m to develop and is one of just four in the country commissioned by NHS England (NHSE) as part of their investment into improving access to specialist treatment for new mothers in regional areas with the most limited inpatient services. Although it will primarily receive admissions from Norfolk, Suffolk and Cambridgeshire, it will also be able to accept referrals from around the country.

GPs and health visitors, as well as mental health staff, will make referrals to the unit, which will be staffed by a perinatal psychiatrist, specialist mental health nurses, nursery nurses, occupational therapist and social worker.

A range of therapeutic services will be available including medication, cognitive behavioural therapy, family therapy, along with help with attachment. Trained peer support workers—people who have personal experience of perinatal mental ill health—will also offer support and practical help.

The new unit will complement NSFT’s new Community Perinatal Mental Health Service, which launched in April and cares for pregnant women and new mothers with serious mental health difficulties, as well as providing support for the rest of the family.

NSFT Chief Executive Michael Scott said: “We are absolutely delighted that our bid to create a specialist mother and baby unit for our region has been successful. This is a vital and potentially life-changing service that, for the first time, we will be able to offer local families from across the region.”

The bid for funding was submitted by NSFT and supported by local clinical commissioning groups. The Trust also worked closely with Norfolk and Norwich University Hospitals NHS Trust, which runs midwifery services, and support group ‘Get Me Out These Four Walled’ to develop the model, which will ensure mothers and babies receive responsive and effective care in a family-friendly unit, which has been designed to meet the highest standards.

“THE IMMEDIATE CARE I RECEIVED FROM NSFT WHEN I WENT INTO CRISIS WAS LITERALLY LIFE-SAVING OFFERING AN URGENT SHORT-TERM SAFE HAVEN.”

News of the unit has been welcomed by Jessica Bannister, who received crisis treatment with NSFT when she suffered postpartum psychosis following the birth of her son, Albert, but then had to travel to Hackney, in London, for specialist inpatient treatment as soon as it was safe to do so. (See page 6 for Jessica’s full story).

“The immediate care I received from NSFT when I went into crisis was literally life-saving, offering an urgent short-term safe haven, and for that I will always be grateful. But there were no local facilities to treat my condition in a specialised environment,” said Jessica, who lives in Norwich.

“The Hackney unit was a godsend for us—even with the distance involved. But if someone becomes ill, it’s much better if they don’t have to travel hundreds of miles for treatment as it’s essential that you’re near your family and friends, so you can keep some kind of life going outside of the illness.

“These units are incredible places—the humanity, love and support you receive is phenomenal. The dedication of the staff to your recovery and wellness, along with the love they give to your child, is fantastic.”

Norwich and Suffolk NHS FT (NSFT)
I had an amazing birth at home but the mania, paranoia and delusions that followed caused high mood, psychosis – a rare and serious mental illness which causes hallucinations.

She was absolutely distraught and getting worse and worse, but Joe Stanton and Holly Brown from the crisis team were just amazing. They volunteered to work overtime to drive Jess, Albert and myself down to London. I was immensely grateful and found it hugely reassuring to be with two professionals.

The journey would normally take two hours but took us around six as Jessica was so distressed. She tried anything to stall us and said we couldn’t leave until we’d all had a KFC, so Joe disappeared and came back 20 minutes later with a takeaway. He really did go above and beyond.

Jessica Bannister first started noticing problems around three days after giving birth to her son Albert in February 2014 at the Norwich home she shares with husband Matthew. Lacking sleep and constantly on high alert as she watched over her newborn son, she began experiencing the first symptoms of postpartum psychosis – a rare and serious mental illness which causes high mood, mania, paranoia and delusions.

“I had an amazing birth at home with no medication, then suddenly everything just became a bit much,” said Jessica, who is now 33. “I wasn’t sleeping and noticed I was starting to get very distracted and finding it difficult to do basic functional things like eat and wash. ‘I then became paranoid and would worry about what my husband was thinking as his face would distort when I looked at him. Four or five things ramped up simultaneously and everything got more scary – my panic turned to terror and the paranoia made me very aggressive. Life became a huge battle ground and it felt like the psychosis was trying to kill me.”

A week later, Albert was admitted to the Norfolk and Norwich University Hospital NHS Trust with jaundice, and worried doctors quickly became concerned for Jessica’s wellbeing. She received a diagnosis following an assessment, and was referred to NSFT’s crisis team, who managed to find her a more appropriate specialist place on the Margaret Oates Mother and Baby Unit (MBU), in Hackney.

By this time, Jess was in such a state that any kind of transition was hugely terrifying for her,“ said Matthew.

“Transport had been arranged to take us to London but she stalled and stalled and we ended up not quite getting out of the hospital door to the waiting ambulance.

“She was absolutely distraught and getting worse and worse, but Joe Stanton and Holly Brown from the crisis team were just amazing. They volunteered to work overtime to drive Jess, Albert and myself down to London. I was immensely grateful and found it hugely reassuring to be with two professionals.

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I’m living proof that recovery is possible

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### POSTPARTUM PSYCHOSIS FACT FILE

- **Postpartum psychosis affects around one in every 1,000 women who give birth**
- **Women are more likely to develop the illness if they:**
  - Have had postpartum psychosis before
  - Already have a serious mental health condition, such as bipolar disorder or schizophrenia
  - Have a relative who has experienced psychosis (even if the woman herself has no mental illness)
- **Once a woman develops postpartum psychosis, there’s a high chance she will have another episode following future pregnancies**
- **Most women with postpartum psychosis will experience symptoms very soon after giving birth, usually within the first two weeks**
- It causes people to perceive or interpret things differently from those around them. Its two main symptoms are hallucinations and delusions, which can severely disrupt the woman’s perception, thinking, emotions and behaviour.
- **Other symptoms include:**
  - A high mood (mania), loss of inhibitions, paranoia, feeling suspicious or fearful, restlessness or agitation, severe confusion and low mood
- **It is important to treat postpartum psychosis quickly.**

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### GET SUPPORT

If you are concerned you or someone close to you is showing signs of mental illness either during pregnancy or after the birth, contact your health visitor or GP immediately for further support and advice. If you have a pre-existing mental health condition you can also speak to your mental health adviser. In both cases you can also get support from our Wellbeing services – see page 11 for more details on how to self-refer.

For further information on postpartum psychosis, go to the Action on Postpartum Psychosis website at www.app-network.org

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A Norfolk man who overcame the depression which haunted him for 35 years has spoken of the enjoyment he gets from helping others in his role as a peer support worker with the Wellbeing Norfolk and Waveney service.

**“Albert was 10 days old when I was admitted. I was nearly sectioned twice so it was a big battle to try and keep him with me, but it would have been catastrophic if we had been separated and would have made the pain so much greater,” she said.**

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“The unit was an incredible place – the humanity, love and support I received was phenomenal. The dedication of the staff to your recovery and wellness, along with the love they give to your child is fantastic.”

Jessica was able to return home when Albert was around four months old, and continued to receive support from NSFT’s community mental health team. She remained on medication for a year but has now fully recovered, and recently welcomed a new arrival – Roxie – to the family on 25 January.

“There was a very real possibility it could have happened again, but we decided we weren’t going to let it dictate our lives,” said Jessica, who is an actor and writer. “During the pregnancy, the water seemed fairly still on the surface, but both Matt and I felt an undercurrent of anxiety and stress.

“Keen to help raise awareness of the illness among other new mums and mums-to-be, Jessica wrote a blog called Mama Courage which has now been adapted into a drama documentary for BBC Radio 4. “Being able to have a creative connection with a life experience was really amazing,” said Jessica, who features in the programme alongside fellow actor Matthew. “It felt powerful and useful and like it needed to be said.”

“People need to know that mental illnesses happen indiscriminately. But our story shows that you can get through it.”

Mama Courage aired at 2.15pm on Friday 12 May. You can listen again via the BBC’s iPlayer.

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**Continues on next page >>**
“Disappearing like that helped me work the aggravation out of my system temporarily. When I got back I found out that everyone was upset with me as they’d been trying to get in touch and had no idea where I had gone. That made me end up feeling worse. “I struggled on after that until I eventually gave up and quit my job. That is when I started to get the help which made all the difference.” Nigel saw his GP and was given various options to pick from, and ended up attending several appointments with a cognitive behavioural therapy practitioner from Norfolk and Waveney.

“I began volunteering and sharing my lived experience with others during the courses and have since become a peer support worker with the service. “It’s great that I am now able to use my story to help other people - I find it really rewarding.”

“SERVICES ARE NOW MAKING IT EASIER THAN EVER BEFORE FOR PEOPLE TO REFER THEMSELVES.”

WHERE TO GET HELP

Wellbeing Norfolk and Waveney and Wellbeing Suffolk offer a range of support for people who think they may be suffering from depression or other common mental health problems such as low mood or stress.

Staff help people make the necessary changes to improve their wellbeing and quality of life. Services include:

• One-to-one support • Self-help advice
• Services for children and young people • Relationship counselling for couples, individuals and families
• Courses to help people achieve a better sense of wellbeing and manage issues such as stress, worry, insomnia and IBS
• Help to find other support for issues affecting your wellbeing such as debt, housing, employment.

IF YOU LIVE IN NORFOLK AND WAVENYE

Wellbeing services are free and available to people aged 16 and over who live in the area. Anyone aged 15 or under should talk to their GP about the services available to them. To access the service:

• Speak to your GP or any other health or social care professional • Self-refer by visiting www.wellbeingnands.co.uk

Call 0300 123 1503

Additional services available include:

• Walk-in centres which provide confidential advice, support and treatment • Peer support from people with lived experience of mental illness and access to social groups

IF YOU LIVE IN SUFFOLK

Wellbeing services are free and are available to people of all ages. To access the service:

• Speak to your GP or any other health or social care professional • Self-refer by visiting www.wellbeingnands.co.uk

Call 0300 123 1781

Anyone aged 15 or under should talk to their GP or any other health or social care professional who will support them through the referral process.

FACT FILE ON DEPRESSION

• An estimated 83,000 people aged between 16 and 74 in Suffolk and a similar amount in Norfolk have anxiety or depression or both - which is the equivalent of around one in nine people.
• There is no single cause of depression. It can occur for a variety of reasons and have many triggers, including stressful life events, such as divorce or redundancy, physical illness, alcohol and drugs and family history.
• Depression affects people in different ways and can cause a wide variety of symptoms, which persist for weeks or months and can interfere with work, your social life and family life. Such as:
  - Sadness, guilt, despair
  - Numbness, losing interest or enjoyment in things
  - Loneliness - even if you are in company
  - Anger and irritability, often without provocation
  - Loss of confidence
  - Suicidal thoughts
  - Expecting the worst and having negative or gloomy thoughts
  - Poor memory or concentration
  - Difficulty in making decisions.
• Depression can also cause physical symptoms, such as:
  - Tiredness
  - Lack of energy
  - Restlessness
  - Sleep problems
  - Feeling worse at a particular time of day, usually mornings.
  - Changes in weight, appetite and eating
• Treatment will vary depending on how severe the depression is, but can include taking therapies, counselling and medication.
• People can also help themselves to stay well by living a healthy lifestyle, enjoying a balanced diet and getting plenty of exercise.

Information from NHS Choices and www.wellbeingnands.co.uk
PSWS KICK OFF 2017 BY RAISING MENTAL HEALTH AWARENESS

Two peer support workers (PSWs) who use their lived experience of mental ill health to help others, kicked off the year by taking to the pitch at Norwich City Football Club to raise awareness of the help which is available locally.

Andrea Bland and Pippa Hoskin, who work for Wellbeing Norfolk and Waveney and are employed by Great Yarmouth and Waveney Mind, placed the match ball on the plinth before the Derby County game on January 2. They took on the duties as part of NCFC’s Community Hero initiative alongside former midfielder Cedric Anselin, who has spoken out about his battle with depression in a bid to help others. (See page 56 for his full story in Insight).

“I TOLD THE STAFF THAT EVERYTHING I HAVE BEEN THROUGH WAS FOR A REASON.”

We would never have got where we are now without their help

A mum whose teenage son has been able to return to school for the first time in two years after receiving specialist mental health support has thanked the staff who helped him by writing a heart-warming and inspirational blog.

Continues on next page >

Insight | Spring/Summer 2017
Norfolk and Suffolk NHS FT (NSFT) but our access to mental health services was being blocked. It was incredibly frustrating and worrying.” Adrien’s problems gradually got worse after the family moved to Norwich in January 2016. On several occasions, his mum was forced to wrestle razor blades and kitchen knives out of his hands, while he would fly into rages and get upset easily. Over the course of eight months, Adrien barely left his bedroom.

“It hugely affected the whole family – we couldn’t go on holiday or even on day trips as we couldn’t get him out of the house. It was very difficult for Adrien’s sister, Liberty, and quite divisive for us as a family as one parent would go off to do something fun with her while the other stayed at home with Adrien.

“By the time he was 12, Adrien was a very unhappy, very unhappy little person and I ended up taking him to A&E as I didn’t know what else to do. Thankfully, we got an emergency referral to NSFT as a result, for which I am so grateful.

“We were finally given a diagnosis of autism, which was a huge relief. We then started seeing Jo Bramble at NSFT at the end of May 2016 and she has been coming to the house every fortnight since.

“On the first few visits Adrien wouldn’t talk to her or make eye contact, but she kept coming and chatting and gradually won his trust. It was such a huge thing as she (Jo) was the first person he had needed to trust in the whole family for months.

“As well as receiving care from Jo, Adrien has also worked with Dr Rini Hoogkamer, a Child and Adolescent Psychiatrist with CFYP services, based at 80 St Stephens, in Norwich.

He has now made such good progress that he began attending St Andrew’s School, near Norwich, which specialised in teaching children with autism, in February.

Helen added: “Adrien is doing well – it’s still very early days but it’s such a huge thing for him to go to school, especially as he hardly came out of his room for such a long time.

“We would never have got where we are now without the team’s help. They are just so brilliant and very kind, caring, compassionate, understanding and supportive. I just cannot praise them enough, which is why I wrote the blog – it didn’t seem sufficient to just send an email.

“The individuals who work in the service are amazing and simply do not get the credit they deserve.”

“At first we didn’t see any results, but just ‘keeping an eye on it’. After a year, though, it was obvious that things were improving.”

“HELEN SHEPHERD’ S SON ADRIEN* HAD

FURTHER INFORMATION AND SUPPORT

• Young Minds, a UK charity which provides information for young people on Autism and Asperger’s - www.youngminds.org.uk

• The National Autistic Society, offers support to people with autistic spectrum disorders, including autism and Asperger syndrome - www.autism.org.uk or call 0808 800 4104

• Asperger United, which is a free quarterly magazine written by people with the condition and health professionals for people aged 16 and over - www.autism.org.uk/aspergerunited

• Autism Alliance, a network of specialist autism charities and provides information and latest news - www.autism-alliance.org.uk

• Autism Connect, a social networking site where people with autism and their families can interact with others and share knowledge and experiences - www.autism-connect.org.uk

• Autism Anglia, an independent charity providing care and support to children, adults and families affected by autism in Norwich, Suffolk, Essex and Cambridgeshire - www.autism-anglia.org.uk

• 4YP (Suffolk Young People’s Health Project) – 01473 252607; enquiries@4yp.org.uk; www.4yp.org.uk/

• Suffolk Family Carers – 01473 835477; email enquiries@suffolkfamilycarers.org; www.suffolkfamilycarers.org

• Autism Facts

– Autism is a development disorder which affects social interaction, communication, interests and behaviour. Around 700,000 people in the UK have the condition.

– Autism is a ‘spectrum disorder’ because it affects people in different ways and to varying degrees.

– People with the condition have difficulty picking up on social cues, being aware of other peoples emotions and feelings and knowing what to do when they get things wrong.

– Other symptoms can include delayed language development and an inability to start conversations or take part in them properly, as well as making repetitive physical movements such as hand tapping.

– On its own, autism is not a learning disability or a mental health problem, although some people with the condition do have accompanying problems.

– Asperger syndrome is a form of autism which affects how a person makes sense of the world, processes information and relates to others.

– People with Asperger’s often have strong language skills, but their speech patterns may be unusual, and they may not pick up on subtleties such as humour or sarcasm.

To read Helen’s blog, visit http://wp.me/p70d5y-92

"THEY WERE JUST SO BRILLIANT AND WERE KIND, CARING, COMPASSIONATE."

Jo, who is a Trainee Assistant Practitioner with the Neurodevelopmental Team based at 80 St Stephens, said: “I’ve never had such a compliment about my work before. It’s really lovely to hear just how much of an impact my support has had. It is a real privilege to work with the family.

“It wasn’t until I read the blog aloud to my family that it really hit home and a tear appeared in everyone’s eyes. It’s what makes me love my job and makes the hard days worthwhile.”

*Adrien’s name has been changed to protect his identity
Four-legged friend helps Lily overcome her fears

A nine-year-old girl whose crippling fear of dogs stopped her from enjoying days out with her family is now able to pet and hand feed the animals after receiving special help from a four-legged friend.

“LILY’S PHOBIA OF DOGS WAS HAVING AN IMPACT ON HER ENJOYMENT OF FAMILY OUTINGS AND TRIPS TO THE PARK, AND MADE THEM VERY STRESSFUL FOR HER.”

Heidi Badat, NSFT Mental Health Practitioner and CBT Trainee, worked with Lily and her mum throughout the 12 weeks.

“I really enjoy helping young people to overcome phobias, which can range from everything from a fear of the dark to a fear of vomit. We concentrate on whatever will be most useful for the young person, and it’s great to see them gradually make progress every week.

“Lily’s phobia of dogs was having an impact on her enjoyment of family outings and trips to the park, and made them very stressful for her.

“It was the first time I had worked with dogs. Lily made really good progress, which was also due to a lot of hard work from her mum and family.”

Lily was awarded a family day pass to the Water Lane Sports Centre, in Lowestoft, along with a certificate and some art materials for winning the competition. Her poster is now on display to help inspire other people at Meridian House, in Lowestoft, where the local CFYP service is based.

Lily Dewberry, who lives in Lowestoft, in Suffolk, was so afraid of dogs that she once pushed her brother into a road to avoid one. But after 12 weeks of help and support from NSFT, she is now comfortable stroking German Shepherd Tula, who is a Pets As Therapy dog, and is even happy to feed her treats.

Lily was so pleased with her progress that she even drew a colourful poster showing herself saying “I’m so brave” standing alongside Tula, which recently won first prize in a creative competition run by the NSFT team.

“Lily was referred to NSFT’s Children, Families and Young People’s Services because she has always suffered with anxiety,” said mum Amanda.

“We were asked to choose one particular thing to work on, which was affecting her life and decided her fear of dogs would be a really useful thing to tackle.

“She has always been absolutely terrified of them and we decided we needed to do something about it.

“We spent 12 weeks working with NSFT, and did a lot of work talking about dogs and watching films before Tula was introduced.

“Initially, Lily looked at her through a window, then was able to be in the same room and gradually got closer to her every week, until eventually she fed her by hand and gave her lots of treats.

“It was amazing and I am really proud of her. She pushed herself out of her comfort zone and, although she is still nervous around dogs, she is generally much calmer than she was. The course has also changed how we talk about dogs as a family, and the way we react when we see them, which we hope will continue to have a positive impact on Lily.”
Making young people’s voices heard

NSFT’s new Youth Participation Lead has spoken of her excitement at being given the chance to join forces with dedicated young people who have suffered with mental ill health to help improve services for others.

Ginnie Beacham-Hulvej joined our Trust in February, and said she had been hugely impressed with the enthusiasm and dedication of the young people she has met so far. She is now looking forward to working with young people to drive forward a series of innovative projects to help others.

“Joining the council has made me much more aware of how many other people are facing the same thing as I did. … I am more empathetic as a result. It has helped me learn to communicate with people better and has made me much happier.”

For more information about the Youth Council, or to feedback views on the service they have received, you can email ginnie.beacham-hulvej@nsft.nhs.uk.

The council is currently planning a presentation on its legacy to give at this year’s International Association for Youth Mental Health Conference, which takes place in Dublin in September. It comes after members attended the 2015 conference in Canada, where they made puppets of themselves to star in a video sharing their experiences of mental ill health.

In addition, the group is hoping to pilot a project with local schools in the autumn term, which provides every pupil with a wellbeing checklist with the aim of eradicating stigma and raising awareness of mental health issues.

“WE WOULD LIKE TO HEAR FROM ANYONE WHO HAS A PARTICULAR INTEREST OR WOULD LIKE TO SHARE THEIR STORY, REGARDLESS OF WHETHER THEIR EXPERIENCE HAS BEEN GOOD OR BAD.”

“The checklist is a really exciting project which could make a big difference to young people,” said Ginnie. “It will encourage people not to ignore their symptoms and to talk to someone, while also signposting them to sources of help. We are also looking at how we can support teachers so that they know what to do if a young person opens up to them about their mental health.

“We will look at the feedback we receive from teachers and young people, as well as information about whether more people are accessing services as a result of the project, before deciding whether to roll out the checklist more widely.”

Over the coming year, Ginnie is also hoping to link more closely with other youth groups and councils operating across the region so that they can feed into the work taking place at NSFT.

“We would like to hear from anyone who has a particular interest or would like to share their story, regardless of whether their experience has been good or bad,” she added. “It may be as simple as telling us you think a waiting room is cramped, for example, but by feeding back we can make changes so that the service is more useful and helpful to everyone.”

The Youth Council meets every month and sets its own priorities for the year, with members also taking responsibility for putting together agendas, writing minutes and acting as chair.

Members have already recorded a number of major achievements, including creating a ‘youth-friendly’ environment at 80 St Stephens, NSFT’s youth service base in Norwich, and taking their stories direct to the heart of Government by speaking to MPs at Westminster. Council members also sit on interview panels when the Trust is recruiting to positions in its CFYP services.

“I have been in services for most of my life as I have OCD, anxiety and depression, but didn’t always have the best experience when accessing care,” said Youth Council member Elise Fage, who is 22 and lives in Suffolk. “When I heard about the Youth Council, it seemed like the perfect opportunity for me to try and improve things for others and really make a difference.”

“I was a strong believer that encouraging participation among service users, patients and carers is really important if you want to improve the experience which people have when accessing care,” said Ginnie, who is currently studying for a Master’s degree in NHS Leadership.

“I’ve found working at the Trust to be absolutely fantastic so far. It’s a very positive place to work, everyone is really committed to their role and there are some great pieces of work taking place. I’ve also seen a clear commitment from those using the services, as well as the people who deliver them, to further improving things, which is fantastic.”

As part of her role Ginnie will work closely with NSFT’s Youth Council, which is made up of 22 people aged between 14 and 25 from across Norfolk and Suffolk. Their role is to ensure the voices of young people across both counties are heard by senior Trust staff, the wider NHS, and other stakeholders, including educators, so that changes can be made to benefit other service users.

“It has opened the door to a lot of new experiences for me. We have helped design a new Child and Adolescent Mental Health Service building to make it more youth friendly, and delivered some training at Ipswich Hospital A&E to help them understand what it feels like to be a young person accessing treatment, which was really well received. “The council is a brilliant support system – the other members are so easy to talk to as they understand what you are going through. We are all there for each other and it’s like a little family.

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“I was a strong believer that encouraging participation among service users, patients and carers is really important if you want to improve the experience which people have when accessing care,” said Ginnie, who is currently studying for a Master’s degree in NHS Leadership.

“I’ve found working at the Trust to be absolutely fantastic so far. It’s a very positive place to work, everyone is really committed to their role and there are some great pieces of work taking place. I’ve also seen a clear commitment from those using the services, as well as the people who deliver them, to further improving things, which is fantastic.”

As part of her role Ginnie will work closely with NSFT’s Youth Council, which is made up of 22 people aged between 14 and 25 from across Norfolk and Suffolk. Their role is to ensure the voices of young people across both counties are heard by senior Trust staff, the wider NHS, and other stakeholders, including educators, so that changes can be made to benefit other service users.

“It has opened the door to a lot of new experiences for me. We have helped design a new Child and Adolescent Mental Health Service building to make it more youth friendly, and delivered some training at Ipswich Hospital A&E to help them understand what it feels like to be a young person accessing treatment, which was really well received. “The council is a brilliant support system – the other members are so easy to talk to as they understand what you are going through. We are all there for each other and it’s like a little family.

“I’ve been in services for most of my life as I have OCD, anxiety and depression, but didn’t always have the best experience when accessing care,” said Youth Council member Elise Fage, who is 22 and lives in Suffolk. “When I heard about the Youth Council, it seemed like the perfect opportunity for me to try and improve things for others and really make a difference.”
YOUNG PEOPLE SET TO BENEFIT FROM GLOBAL BEST PRACTICE

Changes to the way young people with emerging personality disorders are diagnosed and treated are set to be introduced following a fact-finding visit to a world-renowned service in Australia.

Dr Sarah Maxwell, a Consultant Child and Adolescent Psychiatrist with our Trust’s CYPP services, travelled to Melbourne in October 2016 to shadow clinicians from the award-winning Orygen Youth Service. The month-long visit was funded by the Winston Churchill Memorial Trust, and gave her the opportunity to look in detail at the way young people with borderline personality disorders (BPD) are assessed, diagnosed and treated with the aim of bringing back learning to the UK.

BPD is a disorder of mood and how a person interacts with others, and affects up to 3% of the adolescent population.

It can cause emotional instability, disturbed patterns of thinking, impulsive behaviour and lead to intense but unstable relationships, but because its symptoms are often associated with other conditions, it can be difficult to diagnose. As such, it can cause long-term problems lasting into adulthood, as well as an increased risk of developing other mental health conditions.

“THE VISIT WAS REALLY USEFUL AND GAVE ME AN INTERESTING INSIGHT INTO ORYGEN’S WORK.”

Dr Maxwell has begun using her experience in Australia to make changes to benefit teenagers in Norfolk and Suffolk, which include enhancing screening and assessment and improving the education provided for families.

“The visit was really useful and gave me an interesting insight into Orygen’s work and its pros and cons,” said Dr Maxwell, who works with the Great Yarmouth and Waveney Youth Team. “We are now adapting some of their approaches to our own services.

“Orygen use a standardised assessment to diagnose patients at an early stage, who are then offered weekly cognitive analytic therapy sessions as well as support and education for their families and carers. The outcomes they achieve for their patients are very good, although treatment is restricted to a maximum period of two years.

“The visit showed me how important it is to pick up on young people presenting in this way as early as possible. We are now starting to use new screening tools to help us to achieve this, as well as looking at additional work we could do with the families to help them support young people more effectively.”

NSFT has identified personality disorder as one of its key five adult pathways in its 2016 – 2021 Clinical Strategy, and will focus on further improving care over the next five years.

“The hardest part was that the person who really needed the help just wouldn’t accept it”

A mother who tried desperately to get medical help for her reluctant son when he started showing symptoms of mental illness has spoken of the importance of listening to carers and urged the NHS to make the most of their first-hand expertise and knowledge.

Continues on next page >>
Acton, near Sudbury, in Suffolk.

and started getting the help and diagnosis of paranoid schizophrenia was hearing in his head told him to himself. It was only after the voices he was willing to visit the surgery was told nothing could be done unless paranoid and difficult to handle, but would not accept it.”

Sam suffered a severe panic attack following a visit to the shops and told his mother that he had a heart attack. He then took a packet of tablets after he was told by ‘Mary, Frank and Karen’ – the voices he was hearing – promising his family to call 999.

"I begged him to go to the GP, he would say that nothing was wrong and everybody else had the problem. The hardest part was that the person who needed help just wouldn’t accept it.”

Sam suffered a severe panic attack following a visit to the shops and told his mother that he had a heart attack. He then took a packet of tablets after he was told by ‘Mary, Frank and Karen’ – the voices he was hearing – promising his family to call 999.

"I was involved in every ward round and felt I was listened to by the staff. Sam would never talk as the voices would not let him, but he worked with me and let me be his spokesman. When he died it was a shock. But sometimes I think it was like divine intervention. Someone was saying that he had suffered enough.”

Jayne now hopes that telling her family’s story will highlight the importance of medical professionals listening to carers.

Sam became very difficult to handle and gradually got worse. Looking after him was a nightmare – he would go out for petrol but not come home for hours as he would drive around town to make sure no one was following him.

"The staff at Wedgwood were tremendous – they knew how afraid he was of being on his own so they would help prepare him for leaving by going and staying in his new home with him overnight.

"I was involved in every ward round and felt I was listened to by the staff. Sam would never talk as the voices would not let him, but he worked with me and let me be his spokesman. When he died it was a shock. But sometimes I think it was like divine intervention. Someone was saying that he had suffered enough.”

Jayne now hopes that telling her family’s story will highlight the importance of medical professionals listening to carers.

"It’s really important to listen to the voices of carers, as they often have an in-depth knowledge of the symptoms their loved one is experiencing,” she added. “This is especially vital if there is a chance that the patient may not be telling the whole truth, or is too ashamed to admit what is happening.

As Sam’s case shows, it’s only when the professionals see the full picture that they can start to offer help.”

Schizophrenia is a form of psychosis which makes it difficult for people to distinguish their own thoughts and ideas from reality. Slightly more common in men than women, it can cause hallucinations, delusions, and difficulties in thinking and changes in behaviour, with acute episodes followed by a period of remission. Although the exact causes of the illness are unknown, a range of factors can make people susceptible, including genetics and complications during birth, drug use and major life traumas, such as bereavement, job loss or any abuse.

Dr Solomka explained: “Although you can experience schizophrenia at any age, men tend to develop symptoms between the age of 16 and 25. This could be because of a genetic predisposition or early childhood trauma.

In women, it tends to occur in the late 20s and 30s, which may be related to hormonal differences.”

Dr Solomka said people with schizophrenia fall into three categories:

- Those with mild to moderate symptoms, which resolve over five years and are able to work and enjoy relationships (about 20%),
- Those with relapsing and remitting schizophrenia who have serious episodes but can return to a stable life afterwards, often remaining in remission for years at a time (about 60%),
- Those with severe symptoms who become less able to live independently over time and need more and more support (about 20%).

In the most severe cases, we try and restrict and manage the symptoms with medication, therapy and support,” he said. “But people become less and less able over time and most will have a dementia-type illness.

The number of people experiencing this very severe form of the illness has fallen in recent years, from around a third of all sufferers to about 20%. This is a sign that we are making progress, and are successfully intervening earlier so that less long-term damage is done. This gives patients a much greater chance of enjoying relationships and gaining satisfaction from life.”

Dr Solomka said that schizophrenia could bring challenges for families, but explained that the most effective approach is to continue offering support.

“There is a lot of research, which shows that families who express a large discussion and an open and critical or overly affectionate, for example, can make it difficult for the patient and contribute to relapses,” he said.

Although it is hard to listen to someone who is delusional and having such strange paranoid thoughts, it is really important not to criticise them. Find a way to say that you realise what they are experiencing is real for them and keep offering support.

It’s a big ask for any family, particularly in the early days, but concentrating on creating a supportive atmosphere rather than focusing whether you agree with their delusions or not is absolutely vital.”

Dr Bohdan Solomka, NSFT’s Medical Director, said that although prompt treatment was essential for minimising the harm caused by schizophrenia, it could often be difficult for families to get help as many patients are unable to acknowledge that they are unwell.

“People with schizophrenia tend to have a lack of insight and become more isolated as they alienate themselves from the health service, their friends and family,” he explained.

“They can become paranoid and although that may have a seed of truth, for example, if someone has been a bit rude to them, they will ruminate on it until it becomes overwhelming.

The people with schizophrenia are good reasons why that delusion is difficult for families to distinguish their own thoughts and ideas from reality.

IDEAS FROM REALITY..."
I decided to show people that I was strong enough to turn my life around and be a better person.

Just 18 months after she started receiving support from NSFT, the 37-year-old Tracey Jackson turned her life around, and has gone from being, in her words, “mad, bad and violent” to working as a volunteer and helping others on the road to recovery.

Tracey was taken into care aged just two. Unlike her sisters, who were both adopted into the same family, she regularly moved between foster carers and children’s homes and described herself as a “problematic child who no-one could handle”. By the age of seven, Tracey had suffered sexual abuse at the hands of a carer. Her behaviour gradually deteriorated as a result, until she was taken into a secure unit in London aged 14.

“I wanted to make other people stop abusing me while carrying on the abuse myself.”

“I was very impulsive and started self-harming, drinking and smoking cannabis.

Her mental health deteriorated further when she set fire to her cell and was put into segregation and spent all day, every day, alone. In October 2014 she was eventually referred to NSFT’s medium secure Norvic Clinic, in Thorpe St Andrew, near Norwich.

“The staff were really great and did a lot of work with me to give me coping skills, which I will continue to use throughout my whole life.”

“The staff at the clinic gave me the independence that I needed. If I thought I was going to self-harm, I would tell them and they would intervene. I started doing occupational therapy and spending time off the unit.

“I also enrolled in some of the Trust’s Recovery College courses, which gave me the chance to meet other service users, staff and carers and learn lots of new skills. They also helped me understand more about my recovery and the improvements I was making to my mental health.”

As her recovery continued, Tracey was transferred to the low secure Whittingham Ward, at Hellesdon Hospital, near Norwich, in April 2015, where her medication was adjusted and her self-harming gradually reduced. She was given more freedom to come and go, although staff would always accompany her if they felt she was in danger.

After suffering a childhood of physical and emotional abuse, Tracey Jackson grew into an angry adult whose self-hate and low self-esteem drove her to make numerous attempts on her own life.

I wanted a normal relationship with my real parents but when I did find them in my late teens, my self-harming got so much worse. “It’s difficult to explain why, but I wanted to make other people stop abusing me while carrying on the abuse myself. I ended up trying to kill myself and was taken to St Clement’s Hospital, in Ipswich, but wasn’t ready for the help. I was still mad, bad and violent and not a nice person to know.”

Tracey’s downward spiral continued until 2014, when she was sent to prison for setting fire to her mother’s house. Her self-harming got worse once she was behind bars, while other inmates would single her out and she became the victim of bullies.

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HELPING YOU TO GET INVOLVED AND HAVE YOUR SAY

As part of our Trust’s commitment to ensuring our service users and carers are central to decision-making about their treatment and our services, NSFT has relaunched its approach to service user participation.

A dedicated Participation Team, led by Marcus Hayward, Head of Recovery, Participation and Partnerships, has been fully recruited to, with a firm aim to ensure our Trust is listening to the views and experiences of service users and carers as much as possible. The team will support service users and carers in having their say in the development of new or existing services, and will provide advice to our teams about how to better involve and engage people, encouraging them to give their opinions on how things might be improved, or changed. They will also support the development of our Trust’s Youth Participation Strategy and the delivery of the Improving Services Together Strategy, as well as supporting service user and carer forums and new locality hubs across all of our localities.

Marcus said: “We really value the perspective of service users and carers – it can be very powerful to listen to their stories, and as more of our staff are exposed to these stories, the more it will help build a culture of collaboration in the delivery of our local mental healthcare.” The new Participation Team comprises Sharon Picken, Participation Lead, covering Norfolk; Lesley Drew, Participation Lead, covering Suffolk; and Ginnie Beacham-Hulvey, Youth Participation Lead, covering both counties.

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(Read more about Ginnie’s new role on Page 18)

SPECIAL EVENT TO GIVE YOUNG CARERS A BREAK

Young people who care for someone with a mental health condition will be given the chance to enjoy the thrills and spills of Pleasurewood Hills at a special event designed to give them a break from their caring roles.

Around 100 carers aged between 11 and 18 from Norfolk and Suffolk will visit the Lowestoft theme park on Friday, 2 June, to allow them to take some time out, socialise with others in a similar position and find out more about how to look after their own health. The event is being arranged by Howard Tidman, a Senior Practitioner with NSFT’s Adult Acute Services, based in Great Yarmouth, with support from a variety of carers groups and local businesses who have donated refreshments to keep the group fueled up during the day.

“We are really grateful to Pleasurewood Hills for so generously waiving the entry fee for this group, and to all of the individuals and businesses who have supported the project so far,” he said.

“These young people face a lot of responsibility in their role as carers, which they have to juggle alongside school work and other commitments. We wanted to give them the opportunity to have fun, socialise with others and enjoy the rides at the theme park.

“ABOVE ALL, WE HOPE THAT EVERYONE WHO COMES ALONG HAS FUN AND ENJOYS THE THRILLS AND SPILLS ON OFFER AT PLEASUREWOOD HILLS.”
S
	anley was diagnosed with Alzheimer’s, aged 69, in February 2016 just weeks after moving home to Costessey, near Norwich, to spend more time with their young grandchildren, from Turkey where he and Rose had lived for nine years. Sadly he died in March this year.

After Stanley Matthews was diagnosed with Alzheimer’s and was admitted to NSFT’s specialist dementia unit in Norwich last year, his wife Rose and daughter Emma Waller launched a £15,000 fundraising appeal in his name. They are sharing with Insight how the disease took hold of the man they loved and how they felt inspired by the care he received to give something back.

Family give something back to others to say thank you for their loved one’s care

Rose and Emma decided to set up the Stanley Matthews’ Appeal after seeing how trips and outings gave him so much enjoyment, and are hoping the same will be true for other patients in Hammerton Court, which is part of our Trust’s Julian Hospital site.

“We started to think about setting up the appeal to organise transport for trips for Hammerton Court patients. We believe as a family that it’s important for people with dementia to still try and go out to see the world. So I made and sold Christmas cakes on the ward, raising £380. Then I gained a bit of confidence and saw that we could maybe raise a decent amount of money.”

Emma set up a JustGiving page and since then we have started to organise more fundraising events in his name. We had a Valentine’s Fish and Chip night where we decorated the café at Hammerton court with tablecloths, flowers and even had ice buckets for the bottles of soft drinks. “Lisa Breame, NSFT’s Dementia Trainer and Julia Claxton, the Clinical Psychologist at Hammerton, were waitresses for the evening, which made the patients feel very special,” laughed Rose.

“HE STARTED TO OPEN THE FRONT DOOR AND SHOUT TO PEOPLE WHO WEREN’T THERE AND I JUST DIDN’T KNOW HOW TO HANDLE HIM.”

Rose and Emma are sharing their story with Insight on Improving Services Together as a reminder of how important for people with dementia to still try and go out to see the world. Rose said: “When I went in, I had a chat with Margaret on the Reception desk; it’s the small things like that which made such a difference. And I feel sure he got the best care possible.”

Their daughter Emma explained that her dad had been a chemical process worker at the Sweet Briar plant in Norwich for 30 years, before taking early retirement and heading off to Turkey with Rose.

“We have been so thankful for the way Hammerton staff cared for Stanley, we felt like we wanted to do something. After his sharp decline I found myself on my own all of a sudden, so if I can spend some of my time doing something beneficial for other patients and staff, why not?”

“We moved back to Norfolk in December 2015, and the rest of the family noticed a distinct difference in him. For me, it took a while to come to terms with it, as it all happened so quickly. “After some persuasion we managed to get Stanley to go to our GP and the Trust’s community dementia team was immediately involved with his care. He was assessed and diagnosed with Alzheimer’s. “As he got worse, he went to stay in a respite home, but after a few more weeks he deteriorated further and was becoming violent with staff there and went into a bit of a crisis, and so he had to be transferred to the specialist unit at Hammerton Court.

“We’ve been absolutely devastated by the whole situation, but my daughter, son and I have all pulled together. “I visited him every other day in Hammerton Court where the staff were so supportive. Most days when I went in, I had a chat with Margaret on the Reception desk; it’s the small things like that which made such a difference. And I feel sure he got the best care possible.”

Their daughter Emma explained that her dad had been a chemical process worker at the Sweet Briar plant in Norwich for 30 years, before taking early retirement and heading off to Turkey with Rose.

Emma said: “Within weeks of their returning home the disease had taken hold of my dad and it wasn’t long before we couldn’t give him what he needed. At Hammerton Court they immediately took good care of him, but the disease took away the man I knew as my dad.”

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“It gave me my life back and took away this obsession”

A writer and activist has spoken of the hugely positive impact which gender reassignment surgery has had on her mental health after crediting the operation as helping to give her back her life. We first met Katy Jon Went in Insight last year and we wanted to catch up with her to see how things had been going.

Katy Jon Went, who lives near Norwich, completed her gender reassignment treatment in February 2016 after undergoing eight years of psychological assessments and hormone therapy. The 50-year-old said the operation had completely changed her life and removed the obsession which had previously dominated her thoughts. She is now able to get on with her life and other pursuits. Katy Jon is now calling for more support to be made available when people first come out as trans, when their mental health is often at its most vulnerable.

“Gender dysphoria caused me 10 years of distress, on top of past depression and anxiety,” she said. “It turned my relationships and my business, and I couldn’t work or function properly. For me, gender was a huge thing on the horizon which completely blocked out the view – I just couldn’t see past it.

“But within a few weeks of having the operation, I felt like a psychological and physical operation. The surgery gave me my life back and took away this obsession.”

Katy Jon now feels gender neutral and prefers to be referred to as “they”, and/or “she”, but has given permission for Insight to use “she” throughout this article. She received her care through a specialist gender identity clinic in London, with her surgery taking place at Parkside Hospital, on Wimbledon Common.

“I grew as a person while I was waiting for the surgery, but would have had the op years ago if I’d had the money to fund it, or felt that society was more accepting back then,” explained Katy Jon.

“I have absolutely zero regrets and cannot put into words how it feels – I suffer with bipolar and even that has been better since having the surgery.

“There is now more support available than ever before, which is encouraging more people to come out as trans. But that is creating potentially huge bottlenecks as there simply isn’t the capacity to cope with demand.

“So some of the biggest mental health crises happen during that delay between seeing your GP and getting an appointment at a specialist centre up to two years later. There is little or no support in place to walk you through the process, and for many of the 80% that consider suicide, this is a critical time with scarce care available.

“It’s a dilemma – to get the service, you have to come out. But coming out means you must live your life in public view, which increases the chance of bullying and social anxiety and can create huge mental health issues.”

Gender dysphoria was traditionally thought to be a psychiatric condition, originating in the mind. However, more recent studies have suggested its origins are biological, and a result of the way a baby develops in the womb.

A range of different treatments are available, depending on people’s individual wishes, feelings and needs. These range from counselling and mental health support to hormone therapy, speech and language therapy, hair removal treatments and gender reassignment surgery.

Currently, specialist help is only available at a handful of gender identity clinics across the country, and funding for any treatment or surgery must be approved by the patient’s local clinical commissioning group. From an initial appointment to surgery can take anything up to 10 years to complete.

Katy Jon said: “Surgery has a very high success rate in terms of mental health, happiness and physical wellbeing. People get their lives back on track and are able to work again and contribute to society.

“Like a physical health condition, gender dysphoria takes over your life until you get the treatment you need. You cannot function fully, which can lead to high levels of unemployment and mental health issues.

“If you look at the bigger picture, the £10,000 cost of treatment is cheap – it helps the individual to become a functioning member of society again and be able to work and contribute financially. At the same time it improves both their mental and physical health, which brings savings to the NHS in the longer term.”

never worried about gender and it feels like I’ve healed a mental problem with a physical operation. The surgery gave me my life back and took away this obsession.”

“I grew as a person while I was waiting for the surgery, but would have had the op years ago if I’d had the money to fund it, or felt that society was more accepting back then,” explained Katy Jon.

A well-established support network for transgender people is in place across Norfolk, with a variety of different groups available for both individuals and their families and partners. For more information, visit www.genderagenda.net/norfolk
Domestic abuse can affect anyone and takes all kinds of forms – physical, emotional, psychological, financial or sexual. Much of it goes unreported, but in one month last year there were 1,115 domestic abuse crimes and incidents reported to Norfolk police. Councils, health services, police and other public and voluntary sector organisations from across the county united behind the I Walked Away Campaign, which aims to encourage earlier intervention, reduce stigma and minimise harm. The next stage in the public awareness campaign will be launched soon and will again by supported by our Trust, among others.

Laura McGillivray, chair of Norfolk County Community Safety Partnership, which has led the campaign, said: “Anyone can be affected by domestic abuse; it may be you, or a friend or a member of your family. Don’t sit on it or keep it quiet, please seek help. There are agencies you can go to for help in turning your life around.”

Norfolk Police Chief Constable Simon Bailey said: “Domestic abuse can take many forms and we do not underestimate how difficult it can be for people to speak about being a victim of such violence. “Identifying and protecting those people at risk is a priority, but it’s equally important they are aware of what constitutes abuse and the help which is available to them. “I BELIEVE THESE CRIMES ARE STILL SIGNIFICANTLY UNDER REPORTED.”

“We’ve invested a lot of energy into raising awareness and understanding about these crimes, building trust in our ability to investigate and prosecute offenders. However, I believe these crimes are still significantly underreported. “Abuse, be it mental or physical, is totally unacceptable and no victim need suffer in silence at the hands of their tormentors.”

“NO VICTIM NEED SUFFER IN SILENCE AT THE HANDS OF THEIR TORMENTORS.”

For more information about domestic abuse and the campaign, visit www.iwalkedaway.co.uk and look out for #IWalkedAway

NSFT supports campaign raising awareness of domestic abuse

A campaign to raise awareness of domestic abuse and increase reporting is being supported across Norfolk as it aims to reach those responsible for abuse, as well as those who experience it or witness it. In Insight we speak to mental health experts who offer support to those who have undergone abuse and to one woman who was herself subject to abuse and who, after turning her life around, is now training to be a mental health nurse.
“I’m proof that there is a happy life after domestic abuse”

A mother who suffered for years at the hands of a physically, emotionally and sexually violent partner has spoken frankly of the psychological impact of domestic abuse and urged others in a similar situation not to be afraid to ask for help.

Caitlin Rivers* was 18 when she started a relationship with a “gentle, sweet, attentive” 30-year-old man who she thought was everything she ever wanted. But just three months later, after the couple married, his behaviour quickly began to change as his temper grew shorter and he started showing aggression towards his two children and his new wife.

“His behaviour changed so subtly that I didn’t notice it at first,” said Caitlin. “It started with name calling and belittling, and he would get very jealous of the fact I was studying at college and trying to better myself. “He wanted to be the centre of attention, so would react if I didn’t do something to get his attention, so would react if I did anything that he found irrational or out of the norm. “The more I questioned and tried to understand his behaviour, the more he questioned and tried to understand mine, and the more his malicious tongue cut deeper and cut deeper. “He would hit me, strip off my clothes and spit on me. He made me feel worthless, empty and numb,” she said. “But the emotional and verbal sides were the worst and cut deeper than anything else.

I started to doubt myself and my capabilities to make even the most basic decision, such as what type of butter to buy at the shop. He questioned everything I said, even when I knew that I was right. I had no confidence and no self-esteem. “But as far as he was concerned he was doing nothing wrong. It was everybody else’s fault but his.”

Caitlin endured six years of abuse but was eventually able to escape after her husband strangled her in front of their one-year-old daughter and his two older children. Realising her life was in serious danger she grabbed his phone, called her parents and took the first steps towards healing the physical, mental and emotional scars the abuse had left behind.

“The psychological control he had over me made it hard to leave,” she said. “I didn’t think I was strong enough or would be able to support my daughter. Leaving my stepchildren was also incredibly hard. “Bruises disappear in time, but you are always left with memories. I still get flashbacks now – just walking past someone wearing the same aftershave which he used can trigger those memories.

I had to learn to respect, love and value myself again and start making my own decisions and choices.”

“At the time there wasn’t any professional support available, but I definitely think it would have helped me. In the end it took around four years for me to heal – I had to learn to respect, love and value myself again and start making my own decisions and choices. “I had to be really proactive and rebuild my life from scratch. I educated myself and got a degree in psychology and sociology to help me understand what he had been thinking and so that I could help others.

“I wasn’t allowed to have interests when I was with him, so had to find new hobbies, make new friends and socialise. When I met my current partner, I also had to learn to trust again.”

Caitlin has since written a book exploring the psychology of domestic abuse, called Love Didn’t Hurt You. She is training as a mental health nurse as a result of her own experiences, and hopes that telling her story will encourage others in similar positions to ask for help.

“I wrote my book to close that chapter of my life, make sense of his behaviour and help others if I could. It was a way to move on and has really helped put my demons to bed,” she explained.

“Anyone experiencing abuse needs to understand that it is not their fault – nothing they could have said or done would make any difference. If you have the confidence, speak out and seek professional help. I’m proof that there is a happy life after domestic abuse.

“Equally, if you are worried about someone else, let them know that it’s not their fault and it’s safe for them to talk to you. Offer them help to find out what support is available, as it may not be safe for them to do that themselves. If you witness any violence, call 999 immediately. “If someone is going to leave, they need to do it in their own time when they have the strength and it is safe. Leave that doorway open for when they are ready to talk and be patient.”

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*Not her real name

For more information about Caitlin’s book or to buy a copy, visit her website at http://caitlininvers.co.uk

WHERE TO GO FOR HELP:

• Anyone who is in immediate danger should dial 999

• 24-hour National Domestic Violence freephone helpline: 0808 2000 247

• Sources of support in Norfolk: www.norfolk.gov.uk/safety/domestic-abuse/how-to-get-help

• Leeway runs a free, confidential 24-hour helpline, which is available on 0300 561 0077. You can email referrals@leewaynwa.org.uk or visit www.leewaysupport.org

• Help for people in Suffolk: www.newdawnsuffolk.co.uk

Source: www.bvab.co.uk

• An estimated 1.8 million adults, aged 16 to 59, said they were a victim of domestic abuse in 2015/16, according to the Office for National Statistics

• Women were more likely to report having experienced domestic abuse than men

• The police recorded more than one million domestic abuse-related incidents in the year ending March 2016

FACT FILE

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--- SPOTLIGHT ON DOMESTIC ABUSE ---
“Working with women and men and who are experiencing, or have experienced, domestic violence is a quite frequent occurrence for those operating in adult mental health teams locally and nationally. When a person who is still in an abusive relationship comes to our attention, the initial focus will be on safety and understanding their needs in the context of their ongoing life. This can be very sensitive work, helping them, in effect, to make sense of what is almost certainly a confusing, difficult and extremely stressful situation.

“As part of this process, and with the consent of the individual, we may work in partnership locally with organisations such as Leeway or Lighthouse, which can, among other things, help people consider how they could leave a relationship safely, if that is what they decide to do.

“When appropriate, we will also work with colleagues in safeguarding and the police to ensure a good outcome. Lives are complicated, and children may or may not be involved. If so, it is essential that their needs and safety are also incorporated into the response.

“The better we feel, the better our decision-making becomes, so another vital element at this time is addressing, stabilising and, where possible, reducing symptoms of stress, anxiety or depression, all of which are normal responses in such adverse circumstances. Here, medication and psychotherapies like cognitive behavioural therapy (CBT) may have an important part to play.

“When somebody has already left an abusive relationship the clinical focus shifts. Very often, people feel an understandable loss of self-confidence and trust in others – again, natural responses when one has been hurt in one or more ways. Often, too, the person in question may be experiencing signs of psychological trauma from the abuse, including flashbacks, intrusive thoughts, nightmares about what happened, or other aspects of post-traumatic stress.

“These trauma symptoms are, in practice, more easily and safely treatable after a person has left an abusive relationship. These difficulties can very often be addressed, and even fully resolved, with the help of psychological therapies like trauma-focused CBT and eye desensitisation and reprocessing (EMDR). If, as part of this work, it emerges that deeper-lying issues from a person’s past need to be processed, such as emotional neglect from a parent which has left someone vulnerable to being exploited or abused in adult life, then this is brought into the therapy.

“With the support of family and friends, where possible, as well as the skills of our teams, we very frequently see excellent outcomes for these women and men who, having rebuilt themselves, subsequently rebuild their lives on a new and stronger footing.”

New look recovery service helps service users live independently

Service users with complex rehabilitation needs are receiving the help and support they need to live independently following a major service redesign which has improved quality and reduced length of stay at a Suffolk inpatient unit. Chris Platten explains how.

Continues on next page >>
The service has had such an impact that it also attracted praise from the CQC during its inspection last year, when it was awarded four ‘Good’ ratings in the ‘Safe’, ‘Effective’, ‘Caring’ and ‘Responsive’ categories. “Chilton House was designed as a home for life, which meant that most of its service users had been staying for more than a decade,” said Chris Platten, Ward Manager. “SRRS has completely changed the model of care. We now actively explore the idea of recovery with people, which has made a huge difference and saw all but two of our long-stay service users discharged within our first year. “We have changed the whole construct of what we do, and have been given the chance to paint our own picture.”

By focusing more on rehabilitation and recovery, SRRS has reduced patients length of stay, repatriated five out-of-area placements, prevented a further three out-of-area placements and discharged 13 long-stay service users to live successfully in the community within its first 15 months. The service has made a huge impact on our service users.”

To create the successful new service, the number of beds at the unit has been reduced to 10 so that the 25-strong staff team can offer intensive support, along with an outreach service when a service user is discharged. The needs of individuals are also assessed in detail by a nurse and therapist before they are even admitted to the unit so that the right care plans can be put in place to help them meet their goals and move towards living an independent life.

“We TOOK EVERYTHING BACK TO THE BARE BONES SO THAT WE COULD MAKE THE BEST USE OF OUR EXISTING WORKFORCE AND FURTHER UPSKILL OUR STAFF.”

“Some people can become trapped in a revolving door of acute stays. If they do not have the functional capacity and living skills to support themselves in the community, they will relapse and go straight back into services just a short time after discharge,” said Graham Walker, Senior Occupational Therapist with SRRS. “We are looking for ways to stop that from happening by keeping people a little bit longer so that we can work on the basics and give them the intense support they need. “The model in place at SRRS gives us the chance to really get to know the service users better so that we can tailor interventions to suit them and work on their personal goals. We will give them support with functional living and coping skills, and put an individual care plan in place at an early stage so that the team is all working towards the same goal.

“SRRS GIVES US THE CHANCE TO REALLY GET TO KNOW THE SERVICE USERS BETTER SO THAT WE CAN TAILOR INTERVENTIONS TO SUIT THEM AND WORK ON THEIR PERSONAL GOALS.”

Feedback we’ve received so far has been good – our service users really appreciate that staff are able to get to know them so well and be really responsive to their needs, and care feel really involved along all the steps towards discharge. “I’m really enjoying what is a challenging role at a new and evolving service, and think that SRRS has the potential to be something really fantastic and a flagship service for NSFT.”

One of the greatest successes of the service so far has been its ability to repatriate service users who are receiving treatment out of area, which both saves the NHS money and improves their experience when receiving care. “If people are unwell and receiving care in an area they are unfamiliar with, they are less likely to want to go out and use their unescorted leave, for example, so will find it harder to progress their recovery,” added Chris. “This can be an even bigger issue if their family members can’t always visit regularly. “By repatriating these service users, we can put the right support in place to help them get out and about in an area they are comfortable with, which in turn helps to gradually build their confidence.

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Norfolk and Suffolk NHS FT (NSFT)
Service, Stowmarket
Suffolk Autism Diagnostic
process for me was made have been a very difficult understanding. What could for the first time in my life, and, perhaps most importantly, dealt with, I have been treated and by every person that I've

“Everyone who dealt with the allowed lots of space; they always seemed interested and caring and never missed a phone call, letter or appointment. You should be rightly proud of the service you are providing and your team.”

Service user
Suffolk Coastal IDT

“For the first time in three years she managed to spend and enjoy Christmas with us! She is now enjoying and living her life to the full; she is back driving, looking after her granddaughter and cooking.”

Service user
Ipswich Hospital
ECT team, Woodlands,

“Over the past year I’ve been able to get involved in various local groups and have been able to make a real contribution. This has been a real boost to my confidence and I feel much happier in my own skin.”

Service user
Woodlands Hospital

For the first time in three years she managed to spend and enjoy Christmas with us! She is now enjoying and living her life to the full; she is back driving, looking after her granddaughter and cooking.”

Service user

\[\text{Norfolk and Suffolk NHS FT (NSFT)}
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Norfolk and Suffolk NHS FT (NSFT) is investing a total of £13.5m improving the facilities from which it delivers care to ensure they are accessible, appropriate and safe for patients, service users, carers and staff.

\[\text{Norfolk and Suffolk NHS FT (NSFT)}
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The Trust spent £2.7m during 2015/16, with a further £3.3m in 2016/17 and £7.5m earmarked for 2017/18. It comes as part of an ongoing programme looking at NSFT’s buildings to make sure they are fit for purpose while disposing of any which are no longer needed so that the money can be reinvested in improvements elsewhere.

Projects which have taken place so far include:

• A £60k initiative to improve access to Mariner House, in Ipswich, as well as increasing the space available to service users, families and staff.

• Work to create the £830k Dragonfly Unit, which provides specialist inpatient care for young people with acute mental health needs at Carlton Court, in Lowestoft.

• A £3.2m redesign programme at the secure services’ Norwich Clinic, in Thorpe St Andrew, which will include remodelling the wards and facilities to make sure they meet the needs of service users.

• £500k of improvements to the wards at Hellesdon Hospital.

Planned projects for the current financial year include £1.5m of improvements to en suite facilities for patients, £1.9m to improve IT resilience and £500k to create a base for an adult acute team at the Julian Hospital, in Norwich.

Julie Cave, Director of Finance, said: “Like many NHS organisations, we are reviewing our estate to ensure we do not use important NHS resources to maintain empty properties which are no longer fit for purpose.

“Disposing of these buildings provides us with vital funds which we can re-invest into maintaining or upgrading other premises so that we can provide a safe and suitable environment for our service users. The improvements we are making represent a substantial investment for the Trust, and we hope that everyone who uses our facilities likes the upgrades we have made.”

The improvements have been part-funded with money from the sale of the main part of the St Clement’s Hospital site in Ipswich, as well as two disused sites in Norwich - Meadowlands and Highlands.

The major restructure will mean that NSFT will be able to offer GP services in central Norfolk and Norwich (City) direct links with locally-based and named mental health professionals. Mental health staff will work together with GPs in their practices to carry out more immediate assessments of people who may have complex mental health issues, while also referring quickly to appropriate secondary mental health services, where there is a clinical need.

Debbie White, NSFT Director of Operations, said: “The community mental health teams will be able to offer appointments in many GP practices rather than expect patients to travel to outpatient clinics further afield, so they can be treated closer to home and in more familiar surroundings.

“In this way, our staff can really work hand in hand with the GPs and practice staff to provide the holistic services people need for both their physical and mental health.

“This is a really important step forward in continuing to improve our community services and increasing access for local people to the mental health support they might need. It is also important to be able to offer even more support in GP practices where people are most likely to attend for the first time with mental health problems.”

The newly restructured service will have three localities instead of the current two – City, North Norfolk, and South Norfolk. There will now be seven teams, instead of the existing four, working across the localities – three in City and two each in North and South Norfolk.

The individual teams will cover a greater geographical area, and therefore have a more focused caseload. An additional Long Term Treatment Team will offer extra support to all three localities.
Ground-breaking research brings new hope to patients with psychosis

Treatment for some patients with psychotic conditions could be set to improve thanks to a ground-breaking research project taking place in conjunction with NSFT.

The Prevalence of Pathogenic Antibodies in Psychiatric Illness (PPiP) study is exploring whether some cases of psychosis are caused by the immune system attacking parts of the brain, and should therefore be treated with immunotherapy rather than antipsychotic drugs. It is hoped the research could revolutionise outcomes for these patients.

Our Trust has been part of the national study since it launched in 2014. The first phase saw NSFT recruit 30 local patients presenting with psychosis for the first time, who were assessed before blood samples were taken. Four of these samples contained NMDAR antibodies, inferring that the psychosis could be caused by a treatable immune system disorder. These patients were then referred to Cambridge for more detailed investigation.

Elsewhere in the country, some patients with the antibodies present have been treated with immunotherapy rather than antipsychotic drugs. Some saw improvements within just two weeks, and were able to return to work within two months.

Dr Ugochukwu, Consultant Psychiatrist (Great Yarmouth and Waveney) and Principal Investigator for NSFT, has been working closely with Joanna Williams, our Trust’s PPiP Coordinator, to recruit patients.

Dr Ugochukwu said: “We are really pleased that NSFT is involved in this exciting study, which could revolutionise treatment for some patients with psychotic illnesses.

“We didn’t expect to see positive results, so were surprised by our findings. However, these results could explain why some patients might not respond to antipsychotics.

“Immune system problems are something we should be looking out for, and we should offer this test to all patients presenting with psychosis.”

The findings of the first phase were published in The Lancet Psychiatry in December, and suggested that up to one in 11 cases of psychosis could involve antibodies attacking parts of the brain.

The second phase of the study, which will run until 2020, expands the remit of the research to include people experiencing either a first episode of psychosis or a relapse, as long as the episode has not lasted more than two years. NSFT is aiming to recruit a total of 109 patients to take part.

Professor Belinda Lennox, a Clinical Psychiartist at the University of Oxford and the study lead, said: “I’m really grateful for the strong support from Uju, Joanna and all the NSFT staff and patients who have supported and promoted the study. It wouldn’t have been possible without them.

“IMMUNE SYSTEM PROBLEMS ARE SOMETHING WE SHOULD BE LOOKING OUT FOR, AND WE SHOULD OFFER THIS TEST TO ALL PATIENTS PRESENTING WITH PSYCHOSIS.”

“The next important step for the research is to work out whether immune treatments are an effective treatment for people with psychosis and antibodies.

“To do this, the research team is starting a randomised controlled trial of immune treatment in people with psychosis and antibodies, starting in 2017, and I’m delighted that NSFT are going to be working with us to recruit to this trial.”

The study has been funded by the Medical Research Council.
Innovative research underway

Two clinicians from our Trust are spearheading exciting research studies which aim to improve mental healthcare after being awarded funding from a prized regional fellowship.

Lead Clinical Pharmacist Andrea Nunney and Research Clinical Psychologist Tim Clarke have been awarded CLAHRC (Collaboration for Leadership in Applied Health Research and Care) fellowships from the National Institute for Health Research in the East of England. Andrea is the first pharmacist to receive the award since it was launched in the region in 2014.

The fellowships cover the costs of releasing the duo from their usual roles for the equivalent of one day-a-week during their year-long studies. When their projects end in December, their findings will be shared across the region with the aim of further improving the care which service users receive.

“I FEEL HONOURED TO BE THE FIRST PHARMACIST IN THE REGION TO BE AWARDED THIS FELLOWSHIP.”

Andrea’s research is focusing on whether more can be done to empower nurse prescribers and help build their confidence with regard to prescribing. Concentrating specifically on drugs prescribed for schizophrenia, she is interviewing nurse prescribers and asking them to complete questionnaires to find out more about their existing knowledge and areas where they feel they could benefit from additional training.

Andrea will then develop strategies and potentially a prescribing tool which could benefit both nurse prescribers and patients in the future. She said: “I feel honoured to be the first pharmacist in the region to be awarded this fellowship, and excited about my research.

“Our nurse prescribers do an absolutely brilliant job, but can often be faced with very complex situations, such as when someone with a mental health issue also has other illnesses which need medication, such as diabetes or heart disease. I want to find out if there is more we could do to help them manage these cases and prescribe in a more clinically effective way.

“The fellowship will also allow me to develop my own research skills so that I can then bring that expertise into our Trust and help upskill colleagues to carry out their own projects to improve clinical care.”

“OUR NURSE PRESCRIBERS DO AN ABSOLUTELY BRILLIANT JOB, BUT CAN OFTEN BE FACED WITH VERY COMPLEX SITUATIONS.”

Tim, who is the Trust’s Research Development Lead for Children, Families and Young People’s Services, is looking at how different components within the youth mental health service interact with each other and what changes could be made to improve outcomes.

As well as holding focus groups with clinicians, commissioners, managers and service users, he is exploring whether engineering design principles can be applied when developing youth mental health services.

“My project is about trying to understand exactly how the different components of a complex youth mental health service interact so that we can see if the processes involved can be improved to make the system work better,” said Tim.

“The first steps were to identify an area we would like to improve, such as access to services, service user outcomes or patient flow, and see what processes are needed to help us produce those improvements.

“Once the project finishes, I hope our recommendations will be shared across clinical services in the eastern region to help further improve the care which children and young people receive.”

EXTRA FUNDING ANNOUNCED FOR AN ADDITIONAL CONTROL ROOM NURSE

Even more people from across Norfolk will receive specialist care for mental health problems after additional funding for a sixth nurse to work in the police control room was announced.

Police and Crime Commissioner (PCC) Lorne Green announced the funding for the role earlier this year. The new recruit will work alongside five nurses employed by NSFT who are based in Norfolk Constabulary’s control room, and will provide professional help and support at times of crisis, as well as travelling to incidents, where appropriate.

Mr Green, said: “The establishment of such a dedicated team of mental health nurses within the police control room has proven a real success and I recognise their hard work and dedication.

“The increased support I am providing will strengthen our commitment to helping some very vulnerable people while easing ever-increasing demands on our officers and staff.

“By adding to the team, we will also be able to provide better mental health support for our officers and staff who, through the challenges of policing, are often subject to situations of great complexity, danger and stress.”

The mental health nurses work alongside control room staff to offer assistance to vulnerable callers. They have immediate access to health records and, by using their expertise in mental health care, can make on-the-spot professional assessments and decisions, which could involve arranging alternative options to the attendance of a police officer.

The initial pilot scheme was launched as a joint venture between NSFT and Norfolk Constabulary in March 2014. It was expanded in October 2014 thanks to extra funding from the Office of the Police and Crime Commissioner and the Home Office.

Figures show that between 28 October 2014 and 20 December 2016, 188 Section 136 detentions, where the police detain someone with a mental health need who requires immediate care or control, have been prevented as a result of the initiative.
Working together to support the homeless

Homeless people who use opiates are now getting better access to a potentially life-saving antidote thanks to a partnership which aims to help reduce the number of people dying from overdoses.

Continues on next page >>

Equality and Diversity award for NSFT

NSFT has been presented with a special award in recognition of the contribution it has made to a nationwide programme which promotes equality and diversity across the NHS.

The Trust was given the recognition award in the spring for its participation in the NHS Employers Equality and Diversity Partners programme during 2016/17.

The award recognises NSFT’s continuing efforts to embed equality, diversity and inclusion across everything it does. It comes after our Trust spent two years as a partner in the NHS Employers programme, during which it played a key role to support efforts nationally to improve diversity and equality across the NHS.

This included sharing best practice across the region and contributing to consultations to help shape national policy and legislative changes. The Trust also engaged in social media campaigns to promote diversity and took part in national activities, such as developing standards for monitoring sexual orientation among service users, which is due to be introduced later this year.

Ravi Seenan, Head of Equalities and Engagement (pictured above far left), said: “We were really pleased to receive this award in recognition of the contribution we have made as an equality and diversity partner over the past year. In particular, NHS Employers told us they were impressed by the great passion, energy and drive our equality leads show for promoting equality and diversity, which is really positive and encouraging feedback.

“We strive to create a culture which promotes inclusion, both for our service users and our staff, and work hard to embed equality and diversity in everything we do. Over the past three years, we have made some real progress across our organisation through initiatives such as new mandatory training for staff and by supporting colleagues to further improve the services we provide. However, we recognise there is still more we can do to create a supportive and inclusive environment for all staff, service users and carers and I look forward to working with colleagues to further strengthen this important agenda over the coming months.”
N
orfolk Recovery Partnership (NRP) is working with homeless hosts across Norfolk to train staff to administer Naloxone, which is used when people have taken heroin and other opiate overdoses. It is hoped that by providing hosts with a take-home kit, as well as the right training on how to use it, the number of people who die as a result of an overdose will reduce.

NRP, which is a partnership between NSFT, The Matthew Project and the Rehabilitation for Addicted Prisoners Trust (RAPt), has trained staff working at many hostels, including Bishopbridge House and the Ripley Project, both in Norwich. A further session has also taken place for staff working for Genesis Housing.

The training comes in addition to NRP’s existing work with homeless people, which includes regularly visiting Bishopbridge House, which is run by St Martin’s Housing Trust, to hold clinics to help people access help with drug and alcohol addiction. The service also operates a Homeless Outreach Team across the county, which takes help directly to vulnerable people, in turn making them more likely to engage with treatment.

As part of this work, the team in Norwich will go out with the Matrix Project, which takes help directly to vulnerable people, in turn making them more likely to engage with treatment.

NRP was launched on 1 April 2013 and provides structured treatment, such as planned interventions, group and one-to-one work, detoxes and prescribing, to around 2,500 people every year. This includes people using opiates, alcohol and non-opsiates such as cannabis, amphetamines, steroids, cocaine and crack cocaine.

Chris Strivens, Deputy Service Manager of NRP, said: “We have worked very successfully in partnership with local homeless hostels for some time to take care directly to this vulnerable group and encourage them to engage with treatment services. “Offering training in how to use this important drug is an extension of that work. Statistics show that

people who use opiates illicitly are 10 times more likely to die than their peers, while almost 1,000 people die prematurely in the UK because of opiate overdose each year.

“Many of these deaths are witnessed by other people, and could therefore be avoided if the right medication was available to help. We hope that by supplying these kits to service users, their families and other key people, we will be able to make sure anyone who has overdosed gets the antidote they need as quickly as possible, in turn saving lives.”

Maria Pratt, Homeless Services Manager with St Martin’s Housing, said: “The team were initially concerned about the responsibility of this (Naloxone training), but the training really helped put their minds at ease and they now see Naloxone as part of their ‘toolkit’ for offering life-saving support to our residents.”

WHERE TO GET HELP

Norfolk: Anyone who would like help with alcohol or drug problems should contact Norfolk Recovery Partnership on 0300 7900 227, visit the website: nsft.uk/nrp or follow us on Twitter @NRPartnership

Suffolk: Turning Point - in partnership with Suffolk Family Carers, Ican and Air Sports - provides an integrated Drug and Alcohol Service with hubs in Ipswich, Bury St Edmunds and Lowestoft. For more information about Turning Point, call 0300 123 0872 or visit www.turning-point.co.uk

Norfolk and Suffolk NHS FT (NSFT)

Mental health staff from NSFT and officers from Norfolk Constabulary are together visiting the homes of drug users where there is a suspicion that out-of-county drug dealers have taken over the property.

They hope to encourage the vulnerable users to ask for help from treatment services, in turn reducing the risk that they will be exploited again in the future. At the same time, the police want to disrupt the activity of dealers, who use these properties as a base from which to sell drugs.

The partnership was launched in January and is part of Operation Gravity, which aims to crack down on drug-related crime and violence in the county.

The NSFT team is referring drug users for treatment with Norfolk Recovery Partnership (NRP). NRP provides a range of advice and treatment for adults with drug and alcohol problems, including assessment, counselling, detoxification, medication and group support.

Terri Cooper-Barnes, Deputy Service Manager with NSFT, leads a team of mental health nurses based in the Norfolk Police control room, said: “By working proactively with the police, we hope to engage with this vulnerable group and encourage them into treatment.

We want to identify these individuals early and do everything we can to help them access support, and feel that going to speak to them in their own homes is the best way of achieving this. At the same time, we can also carry out a mental health assessment, as many of these people may have an existing condition as well as a drug dependency.

“We have worked very successfully with the police on a number of initiatives in the past, and hope that this partnership project will prove just as valuable.”

The new partnership builds on the role of the NSFT team based in the police control room, which currently provides expert advice in any situation where mental health is a factor. This makes sure that people get the right support when they present to the police in a crisis.

Chief Superintendent Dave Marshall, County Policing Commander and Operation Gravity lead for Norfolk Police, said: “We want our campaign to look at all aspects of drug dealing and working with Terri’s team means we can offer vulnerable members of our community help to make positive changes in their lives.”

“Giving people who get caught up in this kind of activity options is an important part of our work. Only by taking away the drugs market can we stop drug dealers from focusing on the county.”

A professionals briefing session arranged by the Norfolk Recovery Partnership, Norfolk Police, and Norfolk County Council took place in March. The event saw more than 100 health and care colleagues from partner organisations across Norfolk attend the morning held at Hellesdon Hospital to learn more about what actions they can take to look after the vulnerable people who are affected by organised out-of-county gangs.
Like everyone else, doctors aren’t bulletproof

A family doctor who considered taking his own life after crippling depression left him unable to leave his home has urged others in the same situation to recognise the symptoms and not be afraid to ask for help.

Continues on next page >>

Finding sanctuary in music

A singer who developed post-traumatic stress disorder (PTSD) after being abused as a child has described the sanctuary she finds in music and the important role it has played in her ongoing recovery. She recently supported an NRP event to raise awareness about drug and alcohol addiction support services.

Lisa Ambrose, who lives in Hockering, near Dereham, played at the NRP’s Conference in November, performing her own song Your Story, which gives a positive message to anyone suffering abuse.

Lisa first picked up a guitar in January 2008, and won a BBC Radio 1 competition just five months later which gave her the chance to open for DJ and producer Mark Ronson in front of an audience of 2,000 people. Since then, she’s gone on to record a variety of songs inspired by her own experiences, and release her first video in February.

“I was abused between the ages of five and 13, and blocked it out of my mind afterwards as I was shocked that I’d been treated that way,” said Lisa, who is now 26. “I managed to lock it away until I started getting flashbacks and nightmares in 2015, and was diagnosed with PTSD.

“Since then I’ve been taking medication and seeing a support worker, which has helped my symptoms to subside, but I can still find things difficult on a day-to-day basis.

“I started writing and performing in a bar in Southwold in 2008, and signed to a small independent label shortly afterwards. Although at times I feel alone and lost, I find sanctuary in expressing my feelings in songs and have found it has helped my recovery.”

Lisa hopes her music video and song will inspire others going suffering abuse to ask for help.

She said: “Although it is a song about abuse, it carries a positive message which aims to give strength to others by telling them its ok, and isn’t their fault.

“I wrote it after joining a local support group, which helped me feel less alone in the long process to recovery.

“I know I am a survivor, and my music has really helped with that - I find it really liberating and it gives me a goal and something to focus on.”

NRP is a partnership of NSFT, The Matthew Project and the Rehabilitation for Addicted Prisoners Trust, which provides drug and alcohol services. Visit www.norfolkrecoverypartnership.org.uk

For more information about Lisa, or to download her music, visit www.misslisaambrosemusic.com
Doctor Richard Gorrod did not realise just how unwell he had become until he woke one morning and could not get out of bed. Wrestling feelings of paranoia and guilt at taking time off work and being unable to help his patients, he was referred to NSFT after physical tests ordered by his GP all came back negative.

Richard spent several months receiving care within the community and as an inpatient at Northgate Hospital, in Great Yarmouth, before he hit rock bottom and was referred to the Priory, in Chelmsford, where he was able to begin rebuilding his life. He is now working to raise awareness of mental ill health, especially among fellow professionals who may not recognise they have a problem.

“IN MY MIND I WAS ALSO A USELESS DOCTOR BECAUSE EVEN THOUGH I HAD A MENTAL HEALTH BRIEF, I COULDN’T DIAGNOSE THE ILLNESS IN MYSELF.”

With hindsight, I think the illness had been creeping up on me for a couple of years, as I was becoming less tolerant and finding it more and more difficult to concentrate. When I had my crash, I was frightened of anything and everything and would hide under the duvet. We live in a very rural area and every time a car drove past I was paranoid it was someone coming to harm me. I felt pretty worthless and guilty about not working, and my self-esteem was very low.

“I remember being disappointed when the blood tests and MRI came back clear. I thought that at least something like a brain tumour would have explained the way I was feeling and made it more valid. I just didn’t understand what was going on.”

Following an urgent referral to NSFT, Richard began attending weekly sessions with Consultant Psychiatrist Dr Liam Callinan and Consultant Psychologist Dr Vanessa Garfoot, and described the care he received from them as “absolutely brilliant.” He was prescribed appropriate medicines, and also attempted to manage his agitation and anxiety by walking 10 to 12 miles every day with his two dogs.

Richard was such a suicide risk that his wife Sarah took three months off from her job as a GP to care for him. He was eventually admitted to the Priory after confessing the meticulous plans he had made to take his own life to Dr Garfoot.

“At the time, I couldn’t work out any other way to solve my problems,” he explained. “Not only was I depressed and unwell, but in my mind I was also a useless doctor because even though I had a mental health brief, I couldn’t diagnose the illness in myself.

“I was getting steadily worse and decided I was going to take my own life on the Friday. But a few days before, I broke down during an appointment with my psychologist. She was so kind, compassionate and caring that I admitted everything to her. I showed what I had been carrying in a rucksack and she referred me to the Priory straight away.

“NSFT funded my admission and the care I received was excellent. I took part in talking therapies and cognitive behavioural therapy for my anxiety and depression, and worked on my self-esteem and practicing mindfulness. I’m still on medication and still see my psychiatrist every three months, but I am so much better than I was.”

“NSFT FUNDED MY ADMISSION AND THE CARE I RECEIVED WAS EXCELLENT.”

“My memories of my time spent at the Priory are pretty good. But then one day, I just literally could not get out of bed.”

“I HAD NEVER BEEN MENTALLY ILL AND MY PHYSICAL HEALTH WAS ALSO PRETTY GOOD, BUT THEN ONE DAY, I JUST LITERALLY COULD NOT GET OUT OF BED.”

“I didn’t see my illness coming at all,” said Richard, who lives in north Norfolk. “I’d been a doctor for 27 years and a partner at Fakenham Medical Practice for 20, and had spent a decade as mental health lead for my surgery. I was also a medical officer with the Royal Naval Reserves and Training Director for the Norfolk Accident Rescue Service (NARS).

“I was fairly capable in various fields and had a supportive family and lots of friends. I had never been mentally ill and my physical health was also pretty good. But then one day, I just literally could not get out of bed.”

He has also given a talk at the Royal Society of Medicine, in London, to an audience which included Professor Sir Simon Wessely, President of the Royal College of Psychiatrists and Professor Clare Gerada, who sits on the Council of the Royal College of GPs.

A trustee of the Norwich and Mid-Norfolk branch of Mind, Richard is now targeting sports clubs and gyms to raise awareness of the importance of safeguarding mental health.

“Although I am no longer working as a GP, my life has gone on and I’ve used my recovery to get involved with lots of other projects,” said Richard, who was also elected as an NSFT Service User Governor earlier this year.

“Statistics show that doctors are more prone to mental illness than the rest of the population. They can be vulnerable because of the pressure of the job, the fact they regularly break bad news and as a result of personality factors such as perfectionist traits and sensitivity.

“But like everybody else, doctors are not bulletproof or invincible. We need more discussion, but men in particular are not very good at talking about it. We want society to reach a stage where people who see signs of mental illness in others feel able to broach the subject and have confidence that they will get a positive response.

“But in my view, another thing which really needs to change is funding levels. Mental illness represents 23% of the burden of disease on the NHS, but receives just 11% of the funding. That isn’t right.

“Ill health, whether physical or mental, can have a significant and devastating effect on both an individual and their family, which is why it is so important that there is parity in the way health services are funded.

“Unfortunately I don’t think enough people realise the huge gulf which exists between the two.”

>> Continues from previous page

--- SPOTLIGHT ON MENS MENTAL HEALTH ---

-- SPOTLIGHT ON MENS MENTAL HEALTH --
NSFT TEAM’S FAN-TASCHE-TIC MOVEMBER

A team of mustachioed Mo Bros from NSFT have been heralded as among the country’s best after collecting a hair-raising £3,259 to help improve men’s health during the 2016 Movember campaign.

The 28-strong team, called One Trust Grew A Mo, put down their razors during November to grow fantastic facial hair while raising funds for the Movember Foundation and awareness of men’s health issues. The outstanding amount raised helped the Trust team to become “a leader of the pack… in the nationwide leader board for fundraising”, according to the Movember Foundation.

The 2016 campaign resonated with the team, which included: • donated left messages of support among men. Many of those who
mental health and reducing suicide rates.

The 2016 campaign resonated with the team, which included: • donated left messages of support among men. Many of those who
mental health and reducing suicide rates.

“Male suicide is a growing problem. Your moustache will die in December to help keep others alive.”

Staff also voted for the team member with the Most Marvellous Moustache and after a very close contest, the winner was named as Phil Cooper, who works as mental health link worker, at Mariner House, in Ipswich. They aim to do it all again this autumn so look out for their fundraising pages and offer your support.

NSFT’S MEN’S WELLBEING NURSE LEAD

Gabriel Abotsie was appointed as our Men’s Wellbeing Nursing Lead last autumn to promote a better understanding of the issues facing men while encouraging them to seek support and treatment.

Gabriel (pictured right) is working to improve the accessibility of services on offer in Norfolk and Waveney, with the overall aim of reaching boys and men at an early stage of their illness and reducing suicide rates. He is also working with Wellbeing Norfolk and Waveney and NSFT’s other specialist mental health services to provide training and offer an insight into how male psychologies work, in turn influencing the way staff work with men during therapy. Gabriel’s role has been funded for two years through a grant to NSFT from the Burdett Trust for Nursing.

He said: “One of the areas we need to address is the stigma of cultural expectations and how it can impact on the ability of men to seek help.

“Right from the development of a child, expectations of boys is different. How many times do we hear people being told to ‘man up’? We need to see a cultural change, and we need to change the way in which we provide services.”

“If we are able to increase the access which men have to mental healthcare, fully engage them and maintain their engagement throughout their therapy, they can gain so much from it.”

NEW PARTNERSHIP TO IMPROVE MEN’S WELLBEING

Partners from across Norfolk have joined forces to form a new working group, which aims to improve the wellbeing of men and boys by raising awareness of the importance of good mental health while offering advice to other organisations.

Set up by NSFT and Norfolk County Council (NCC), the Men’s Wellbeing Network Group includes representatives from a raft of charities and voluntary organisations who are working collaboratively to raise awareness of issues around men’s health.

Its ultimate aim is to reduce suicide rates among men, which public health statistics show are three times more likely to take their own lives than women, with those aged between 45 and 59 at the highest risk. The group has already met twice, and has begun arranging a special men’s wellbeing day for later this year.

“THERE ARE MANY SOCIAL AND ENVIRONMENTAL PRESSURES AND EXPECTATIONS ON MODERN MEN.”

The event will include speakers, such as Service User Governor, Richard Gorrod, and former Norwich City footballer Cedric Anselin, who both overcame severe depression and now act as ambassadors promoting good mental health. A range of information will also be available at the day, which takes place on Thursday, November 23, at the King’s Centre, in King’s Street, Norwich.

Gabriel Abotsie, Men’s Wellbeing Nursing Lead at NSFT, said: “There are many social and environmental pressures and expectations on modern men, while the coping strategies which men use in response to these pressures differ to those of women. Men are generally less likely to open up to friends and family and more likely to exhibit risky behaviours.

“We are excited to collaborate with partner organisations with a range of specialties and expertise to look at ways in which we can better promote men’s wellbeing in Norfolk.

“We are developing a common narrative so that we give a consistent message to help improve people’s wellbeing while working together towards our ultimate goal of reducing suicide rates in Norfolk.”

The group also includes representation from the Samaritans, Wellbeing Norfolk and Waveney, Active Norfolk, You Are Not Alone (YANA), local Mind organisations, Walnut Tree Project, Julian Support, The Outsiders, Relate, Healthwatch Norfolk, MensCraft and Men’s Shed.

Andy Wood, from MensCraft, said: “This is a significant but long overdue initiative which recognises that men’s wellbeing requires a different response and approach to women’s.

“The MensCraft has been developing services in Norfolk that contribute to men’s wellbeing – such as the Norwich Men’s Shed – for the past 10 years. We now look forward to working with our partners in the network to create more services and activities that will make a positive contribution to the lives of Norfolk men.”

Richard and Cedric’s stories both feature in this edition of Insight. Turn to pages 51 and 56 for more information.
B

ut his biggest challenge came off the field. During the past 14 years Cedric has fought a secret battle with severe depression which cost him his marriage and almost his life. Now receiving treatment from NSFT and feeling positive about the future, the 39-year-old has bravely decided to share his story in the hope that it may encourage others – and to think about going anywhere else. As I did in Norwich, and I didn't want to make my life away, but luckily my wife was there and with her support, I managed to carry on."

"I pushed people away and became very selfish. It got to the stage where I struggled to leave the house to go to the supermarket or meet friends and would have to prepare myself for at least an hour before I could face going out. One day I just got up and felt I'd had enough and couldn’t deal with it anymore. I wanted to take my life away, but luckily my wife was there and with her support, I managed to carry on."

"We shouldn’t be ashamed to talk about our difficulties – it has helped me massively to talk about it," he added. "Mental health problems are not a weakness, they are an illness like any other – the only difference is that mental illness is hidden from sight. I have been in that dark place and know what it’s like but am now moving on with my life. I can walk with my head held high, and am more than happy to help anyone else if I can."

"In my case, I knew in my heart that something wasn’t right many years ago, but I never really understood what was causing it as I was doing the best job in the world, getting paid well and entertaining people – I was very privileged."

"My depression was my secret for many years before Christmas 2016. His wife had left two months earlier as a result of the mood swings, caused by his stillundiagnosed illness, and he found himself standing in his loft about to take his own life. Cedric explained: “Losing my wife really hit me, as she had always been there for me. She was my support, my rock. She dealt with everything because I got stressed so quickly that I couldn’t really help. We spent half our lives together, and when our relationship came to an end I couldn’t find my feet. I was completely lost and just had enough.”

"SOMETHING POSITIVE HAS COME FROM SOMETHING WHICH WAS VERY DIFFICULT."

In the eyes of many, Cedric Anselin has lived the dream. A professional footballer, his career had seen him play alongside superstars such as Zinedine Zidane, take to the pitch in the UEFA Cup Final and represent his country at under-21 level.

"Talking has helped me massively... Now I walk with my head held high"

Cedric reached his lowest point before Christmas 2016. His wife had left two months earlier as a result of the mood swings, caused by his still-undiagnosed illness, and he found himself standing in his loft about to take his own life. Cedric explained: “Losing my wife really hit me, as she had always been there for me. She was my support, my rock. She dealt with everything because I got stressed so quickly that I couldn’t really help. We spent half our lives together, and when our relationship came to an end I couldn’t find my feet. I was completely lost and just had enough.”

"Mental Health Problems Are Not A Weakness, They Are An Illness Like Any Other."
After the courageous and moving disclosures of a number of prominent former-footballers in recent months, there is much to be sorry and angry about. In the wake of such devastation to young people’s lives, perhaps the best we can hope for is change. Boys and men feeling troubled by any emotional problem may, inspired by these sportsmen, come to break their silence and find it easier to ask for the help they deserve.

“Historically, men in adversity have shown the stiff upper lip. This has been helpful, up to a point. Life has a habit of throwing everything at us – when we least expect it – when we least expect it. Support declares itself. Options emerge.

“As a man, I have seen this in my own life, and as a clinical psychologist too, I have seen this with countless men. These men have said three little words we used to think were unsayable: ‘I need help’.

“And once that invisible barrier is overcome, we can do the therapeutic work, if formal therapy is what is needed – bearing in mind there are more options now for men than ever before. As well as direct ways of psychological working, like cognitive behavioural therapy, there are various indirect ways of working – like Men’s Sheds, for example – all of which can be helpful in different ways.

“When men access these options, they are often pleasantly surprised. Things may improve significantly. Symptoms may decrease. They may feel better. They may even begin to enjoy themselves more. To those of us who are involved, this is always good news.

“So when men reach out, great things can happen. This may be one lasting legacy of the ex-footballers.”

The Norfolk Big Rugby Weekend, on May 6 and 7, saw teams from across the county descend on Holt to compete in the season’s major finals, while it also aimed this year to reduce stigma and raise awareness about asking for support with mental health – for men in particular.

At the same time, representatives from NSFT and Norwich and Central Norfolk Mind took to the pitch to contest a hard-fought game of touch rugby with the aim of raising awareness of the importance of looking after your mental and physical health. Both teams were coached by Soul Phoenix an England touch rugby international.

Both organisations displayed a range of information about the services and support which are available locally, as well as the things people can do to safeguard their own wellbeing.

“As well as celebrating rugby, the weekend was also designed to highlight the importance of mental health,” said Dr Richard Gorrod, NSFT Service User Governor and Chairman of Holt Rugby Club Youth team, who helped to organise the event.

“The match between NSFT and Mind was a lot of fun, and we encouraged a bit of friendly rivalry between the teams. We had some great support from the directors of both organisations and were really pleased that so many people came along to watch.

“At the same time, clubs from across Norfolk are always happy to welcome new faces. At Holt, for example, we have teams from the under-sixes all the way to adult rugby, and even an 86-year-old playing social touch rugby.

“Not only is the sport great for fitness and mental wellbeing, but it also promotes a strong sense of family.”

As well as the games, spectators were also able to enjoy live music on Saturday night.
The results of the 2016 NHS Staff Survey showed a real improvement in how our staff feel about our Trust. We asked Michael Scott, our Chief Executive, to explain more about the areas where we performed well, as well those where steps are being taken to progress further.

"The work we are doing to change the culture of our organisation is having an impact." 

"Our results placed us as one of the most improved of all NHS trusts in Norfolk, Suffolk and North Essex for our overall engagement score. And we appear to be the only local NHS trust showing a significant improvement in our score, year-on-year.

"Our results placed us as one of the most improved of all NHS trusts in Norfolk, Suffolk and North Essex for our overall engagement score."

"We appear to be the only local NHS trust showing a significant improvement in our score, year-on-year."

"It indicates that we are moving in the right direction towards our goal of making sure our staff feel valued and appreciated. It also demonstrates that the work we are doing to change the culture of our organisation is having an impact, although we recognise that this process will take time and there is still much we need to do to get to where we want to be.

"But let's start by expanding on those positives. Firstly, we were delighted that 58% of our staff – a huge increase on previous years – took the opportunity to complete the survey, which has given us a better picture of how our staff perceive our Trust as a place to work.

"Year-on-year, we also saw a significant statistical improvement in 19 of the 32 key findings – a very positive upward trend. At the same time, none of our scores deteriorated, although we do remain below the national average in many areas.

"The areas in which we have seen the biggest positive movement in our scores (known as statistically significant improvements) sit at the heart of staff involvement, quality issues and working with our service users (see table opposite).

"Since we asked staff for their opinion on our Trust in 2014, when we first began to turnaround NSFT as a place to work, we have seen:

- A 49% increase in staff saying that care of service users is our Trust’s top priority.
- A 32% increase in staff who would recommend our Trust as a place to work
- A 19% increase in staff who say they are enthusiastic about their job.
- A 24% increase in staff who look forward to coming to work.

"Our Trust’s overall staff engagement score showed a marked improvement at 3.62, up from 3.50 in 2015, and from 3.41 in 2014. This ‘overall score’ is made up of the results from three, central key findings:

- Staff recommending our Trust as a place to work or receive treatment (improved in 2016)
- Staff believing they have the ability to contribute towards improvement at work (improved in 2016)
- Staff motivation at work (remains the same)

- Since we asked staff for their opinion on our Trust in 2014, when we first began to turnaround NSFT as a place to work, we have seen:

- Satisfaction with the quality of work and care staff are able to deliver
- Percentage of staff who agree their role makes a difference to service users
- Effective team working
- Good communication between senior management and staff
- Fairness and effectiveness of procedures for reporting errors, near misses and incidents
- Confidence and security in reporting unsafe clinical practice
- Recognition and value of staff by managers and the organisation
- Organisation and management interest in and action on health and wellbeing

"Despite our recent progress, we still have much we need to do to get to where we want to be. We are committed to a continued process of change and development."

"However, our results were still some way off from where we intend to take our Trust, and there are still many areas where our scores are below the national average when compared to other mental health and learning disability trusts.

"We are also very concerned to note that we are within the country’s 10 worst performing trusts for the question ‘If a friend or relative needed treatment I would be happy with the standard of care provided by this organisation’.

Continues on next page >>
"But in this question we have still seen a positive 28% increase on our 2015 score, from 38% to 48% agreeing or strongly agreeing, so although we are not yet where we would like to be, a significantly larger number of staff this year said they would be happy with our care. We have also seen improvement in our score for the question of ‘staff recommending our organisation as a place to work or receive treatment’. The bottom five ranking scores, which we will now specifically focus on, are:

- **Percentage of staff appraised in the last 12 months**: 73% (2015), 76% (2016), 89% (national average)
- **Support from immediate managers**: 3.68 (2015), 3.77 (2016), 3.88 (national average)
- **Staff motivation at work**: 3.77 (2015), 3.80 (2016), 3.91 (national average)
- **Percentage of staff reporting error/ near misses/incidents witnessed in last month**: 87% (2015), 88% (2016), 92% (national average)
- **Staff recommending the organisation as a place to work or receive treatment**: 3.12 (2015), 3.37 (2016), 3.62 (national average)

"Of course, we remain committed to improve in those areas where we witness the least improvements, and have invited all of our staff to discuss these results with their team leaders, so that we can quickly find ways to improve further.

"In addition, a range of other initiatives are also being introduced to benefit our staff, including enhanced support for those experiencing mental ill health, extending our Healthy Worker Programme, simplifying our appraisals and offering NHS health checks.

"WE REMAIN COMMITTED TO IMPROVE IN THOSE AREAS WHERE WE COMPARE LEAST FAVOURABLY."

"We really appreciate the hard work and dedication of everyone who works for our Trust, and are confident that by continuing to work together we can build on these solid foundations and record some even greater improvements in next year’s survey."

"Although the financial climate continues to prove incredibly difficult for all health care organisations, the past 12 months have looked brighter for our Trust as we have successfully reduced our deficit from £6.9m in 2015/16 to £3.3m this year. We plan to continue this so that we are in surplus position in 2018/19. We have also seen growth for the first time in five years – which has totalled £7m – which at the same time making the highest capital investment that this Trust has seen for quite some time, which is great news for our service users and staff."

"The improvement we have seen has been a result of several key factors. We have won new NHS contracts such as Suffolk Wellbeing, and made efficiency savings, for example by reducing our agency spend by £4.3m since last year. Elsewhere, we have successfully negotiated increases in funding from our commissioners. We received an additional £6.5m in Norfolk and Waveney, which is being spent in areas such as suicide prevention, improving services for children and young people and increasing the number of patients who receive early intervention following their first episode of psychosis. In Suffolk, commissioners have awarded us an extra £1.7m to boost our eating disorders service and to meet the ‘parity of esteem’ financial standard, which means we should receive funding at least equivalent to the CCGs’ increase in funding.

"In comparison to other NHS trusts locally, our cost improvement programme (CIP) is also relatively low at 4.5% compared to some which are as high as 8%. And every CIP project is signed off by a panel, which includes frontline clinicians, who continue to make sure that any savings we make do not have an impact on the quality of our services."

"Indeed, the fact that we have been able to improve our position significantly without compromising the safety and effectiveness of our services is testament to the commitment and hard work of all our staff and to the support of our commissioners. However, there is still more to be done and areas where we must improve still further in the coming 12 months."

"One of the issues we will continue to focus on is the amount we spend on out of area and out of Trust placements. This totalled £4.5m during 2016/17, which is an overspend of nearly £3.5m. Aside from the financial implication, these placements are not ideal for our service users and something we must continue to try and reduce wherever possible."

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**Key Finding**

| Percentage of staff appraised in the last 12 months | 73% | 76% | 89% |
| Support from immediate managers | 3.68 | 3.77 | 3.88 |
| Staff motivation at work | 3.77 | 3.80 | 3.91 |
| Percentage of staff reporting error/near misses/incidents witnessed in last month | 87% | 88% | 92% |
| Staff recommending the organisation as a place to work or receive treatment | 3.12 | 3.37 | 3.62 |

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**NSFT clinical income since 2013**

- 2013/14: £180,000
- 2014/15: £185,000
- 2015/16: £190,000
- 2016/17: £195,000
- 2017/18: £200,000

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**For the first time in five years, NSFT has seen financial growth while reducing its deficit by more than half in just 12 months. We asked Julie Cave, Director of Finance, to explain how the Trust has made the improvement and how we hope to sustain it over the coming year:**

"We really appreciate the hard work and dedication of everyone who works for our Trust, and are confident that by continuing to work together we can build on these solid foundations and record some even greater improvements in next year’s survey."
New report aims to reduce pressure on NSFT's beds

An independent report exploring initiatives aimed at relieving the pressure on local mental health beds has been published.

The comprehensive review was jointly commissioned by NSFT and the Norfolk clinical commissioning groups (CCGs), and comes in response to increasing demands on mental health services which have seen some patients sent for inpatient care out of area (OOA) at times of high pressure. Although the Trust has opened more crisis beds in 2015 and 2016, and has made it a priority to reduce out of area placements, the number has risen as demand for all services has increased.

As a result, NSFT and the CCGs appointed independent experts Mental Health Strategies (MHS) to look in detail at its adult acute care pathway, including crisis services, crisis assessment, inpatient beds, length of hospital stay and community services. The review was drawn up in consultation with frontline mental health staff, GPs, commissioners and stakeholders, and focused on:

• Determining how many and where beds are needed to deliver day-to-day services while continuing to meet increasing demand
• Identifying hot spots or issues which cause additional pressures in the system and on beds
• Offering best practice advice on what has helped other parts of the country to manage the increasing demand on NHS mental health beds and services

The report concluded that if differences are addressed in the way referrals to inpatient beds are made in various parts of the Trust, and additional alternatives to admission are introduced, the current number of NSFT beds could be sufficient to continue meeting demand. These alternatives will be developed under the remit of the Mental Health Sustainability and Transformation Plan.

Michael Scott, NSFT Chief Executive, said: "The last thing we want is for local people to have to travel elsewhere for their care as we fully understand the distress this can cause to many patients. We are determined to do whatever we can to bring down the number of OOA placements consistently.

"But it is important to stress that it is not just about the number of beds. Not all people in mental health crisis need to be, or should be, admitted to a bed, and the best outcomes are often achieved when they can remain in their own home, close to the people who care for or support them, with good community-based, mental health support in place. "That is why our Trust and our commissioners have continued to invest extensively into community services and preventative services to keep people as well as possible for as long as possible.

"We all know there are finite resources in the NHS and so the emphasis of this has to be about identifying if we have the right type of beds in the right places to meet local needs, and how can we better manage all of our services to ensure that our beds are free to support the people who really need an inpatient stay."

"WE ARE DETERMINED TO DO WHATEVER WE CAN TO BRING DOWN THE NUMBER OF OOA PLACEMENTS CONSISTENTLY."

Michael explained that an acute and community pathway of mental health services has many stops and checks where health professionals can ensure people stay at home as well as possible and avoid the need to go into hospital.

"If we are not using our existing beds and services efficiently for the best purpose and with the best outcomes, then adding more beds can potentially add to the problem," he added. "You can get a revolving door scenario, where people are in and out of hospital rather than receiving more appropriate community support, which better helps them to live their lives independently and well."

The £58,000 cost of the review was shared between NSFT and Norfolk and Waveney CCGs, who jointly commissioned the project.

Antek Lej, Chief Officer of NHS North Norfolk and NHS South Norfolk CCGs, said: "There are some really interesting initiatives which have proven to work very well in other parts of the country in keeping people well and out of hospital. “We are working through the findings of the independent report with NSFT and frontline staff and after these discussions we will have a clearer picture on how we might develop local services and initiatives, which will be drawn up under the remit of the Mental Health Sustainability and Transformation Plan work."

MHS's findings include:
• Crisis cafes and step down beds would provide alternatives to admitting patients to acute inpatient units
• NSFT is planning to open a crisis cafe in Norwich in 2017/18 to offer a safe, specialised, community setting where people with an escalating mental health condition can go for immediate professional support
• Work is also taking place to explore in greater detail the potential impact which step down beds, which are used when a person is no longer in a mental health crisis but is not yet ready to return home, could have on reducing admissions to acute units
• The development of a community personality disorder service would provide a useful addition to existing services

NSFT already provide services to people with personality disorders, and is currently working on a Personality Disorder Strategy. The review further highlighted the need for a specific PD service.

An NSFT consultant is leading a project to create a community personality disorder service (from existing resources) which will offer high quality assessment and supervision, as well as a range of interventions, such as active listening, psychotherapy and crisis response. Work is due for completion at the end of 2017-18.

Learning and best practice should be shared across the Trust to address differences in referral and admission rates between community teams.

The Trust is working with clinicians to develop a consistent approach to admitting and discharging, as well as criteria for admissions.

Recommendations to standardise practice which appropriate are also being drawn up

The full report is available by visiting www.nsft.nhs.uk/our-priorities
Suicide Prevention Strategy

Our Trust is committed to working with health and social care partners to reduce the number of people in Norfolk and Suffolk who take their own lives. We asked Dr Jane Sayer, Director of Nursing, Quality and Safety, to tell us more about NSFT’s Suicide Prevention Strategy approved by the Board earlier this year.

“Suicide has a devastating impact on families and communities, but remains something we have a limited understanding of and struggle to talk about openly. That is why our new Suicide Prevention Strategy is so important – it commits our Trust to do all that we can to avoid the loss of life to suicide and forms an essential part of our ambition to constantly improve the quality of everything we do.

“SUICIDE HAS A DEVASTATING IMPACT ON FAMILIES AND COMMUNITIES, BUT REMAINS SOMETHING WE HAVE A LIMITED UNDERSTANDING OF AND STRUGGLE TO TALK ABOUT OPENLY.”

The strategy strengthens pledges which are already in place at our Trust – to consistently deliver good standards of fundamental care, such as training, ensuring seven-day follow up from inpatient services and providing safe environments and services. It also shows how we will continue to learn from events by constantly evaluating our actions and the impact which they have on our service users and their families.

“The strategy describes a range of further steps we will take to reach our ambition of reducing the number of people in our care who take their own lives. These five priorities have been developed in partnership with our service users, carers, staff and stakeholders and also take into account learning from local cases. They are:

• Focus on the safety of clinical pathways and get the essentials of assessment and care planning right every time to make a positive difference to the lives of service users
• Further enhance the support given to families and carers
• Support staff with the most up-to-date skills and knowledge to enhance their understanding of suicide
• Use best practice and innovation from elsewhere while also testing new ideas locally to reduce suicide
• Continue to work with partners to deliver county-wide actions developed in conjunction with Norfolk and Suffolk’s multi-agency suicide prevention groups

“Importantly, it addresses the fact that suicide is not just about mental health services; it is something which affects communities and every individual or organisation within those communities.

“The Strategy Supports a National Target to Reduce Suicides Among the Whole Population by 10% by 2021.”

“if we don’t all work together to prevent and make ourselves aware of the risk of suicide and mental health issues, then we will miss the opportunity to prevent deaths that might be avoidable. As such, the strategy supports a national target to reduce suicides among the whole population by 10% by 2021.”

“Over the coming months, we will regularly review and monitor the progress we make towards delivery of the strategy, so that we can ensure the actions we take are making a real difference to the safety of our service users when they are at their most vulnerable.”

To read the full strategy, visit: www.nsft.uk/SuicidePreventionStrategy

Suicide Prevention Strategy

Reducing deaths among our service users is a priority for NSFT. We asked Dr Bohdan Solomka, our Medical Director, to update Insight on the work of our new Mortality Review Group, which has been set up to ensure our Trust learns from the data and takes action, where necessary.

“MEETING QUARTERLY, THE GROUP LOOKS IN DETAIL AT THE DATA SURROUNDING DEATHS AMONG OUR SERVICE USERS SO THAT WE CAN IDENTIFY ANY TRENDS AND TAKE ACTION, WHEREVER NECESSARY.”

“For the past two years, our Trust has renewed its focus on reducing deaths among our service users. We’ve taken a range of proactive steps to drive this work, including commissioning Verita to review our data, publishing our new suicide strategy and setting up our new Mortality Review Group.

“Meeting quarterly, the group looks in detail at the data surrounding deaths among our service users so that we can identify any trends and take action, wherever necessary. The figures have been broken down by age, sex, location, service and diagnosis which, over time, will mean we will be able to draw some meaningful conclusions as to whether there is anything our Trust could be doing differently.

“So far, we have examined figures for the six-month period from April to September 2016, which showed there were 237 deaths, the majority of which were in contact with our services. Of these, 61% were males and the majority (44%) fell into the 61 years plus age category. The highest number of deaths were in the west Norfolk locality.

“Bearing in mind the recent focus on suicides at the Trust, we were pleased that the data did not show any evidence of an increase in the number of people taking their own lives, with the level remaining roughly the same for the past four years. This is a key area for NSFT, and one we will continue to focus on as we gather more data in the coming months and years. However, we need to learn from every death, whether we did all we could to prevent it and any future suicides.

“MEETING QUARTERLY, THE GROUP LOOKS IN DETAIL AT THE DATA SURROUNDING DEATHS AMONG OUR SERVICE USERS SO THAT WE CAN IDENTIFY ANY TRENDS AND TAKE ACTION, WHEREVER NECESSARY.”

“INTERESTINGLY, THE FIGURES DID SHOW LINKS BETWEEN CERTAIN MENTAL HEALTH CONDITIONS AND PHYSICAL HEALTH PROBLEMS. FOR EXAMPLE, A HIGH PROPORTION OF MALES WITH BIPOLAR AND SCHIZOPHRENIA DIED FROM ISCHAEMIC HEART DISEASE. AS A RESULT, ONE AREA WHICH MAY REQUIRE FURTHER work is ensuring that those with mental health problems can also access the right care to meet their physical health needs. Taking steps such as developing our smoke-free policy to better support service users to free smoking cessation services available on the NHS will also be important.

“This is the first six-month period we have reviewed using current data collection methods, which means it is not possible to provide long-term trends at this stage. However, one thing we can be assured of is that two independent reports, from Verita and NHS England, have shown we are a trust which is a high reporter of unexpected deaths and serious incidents, and one which reports early. This is good news as it is recognised that organisations with high levels of reporting are generally safer – it is where there is a culture of honesty, blame or deflection that things can go wrong.

“We take the death of any of our service users incredibly seriously, and will continue to examine this data closely and review each case in detail to see if there are any further lessons we can learn. There has been guidance given by the Department of Health recently, focusing on the need to include families in the learning process, to have Trust Executive and Non-Executive leadership, and to demonstrate actions based on the themes emerging from the mortality review. As a Trust, we will work to these objectives.”

Mortality Review

Reducing deaths among our service users is a priority for NSFT. We asked Dr Bohdan Solomka, our Medical Director, to update Insight on the work of our new Mortality Review Group, which has been set up to ensure our Trust learns from the data and takes action, where necessary.
Norfolk and Suffolk NHS FT (NSFT) worked with organisations, such as City Reach which provides GP services to those at risk of homelessness. “Of course, if homelessness is a factor during an admission to one of our own mental health wards, our discharge coordinators will work with the relevant agencies to support that person moving on.”

In Lowestoft, we are also working with Lowestoft Rising, which has been successful in securing some funding to continue their work with homeless people or those at risk of homelessness. “All of our services support referrals to social care and housing agencies so that all of the individual’s needs can be met, including any mental health issues they may be struggling with.”

The overarching feedback from our staff is that they want to spend more time delivering care and less time managing business processes to ensure better outcomes for service users. “In support of this, over the past 18 months we have made a number of changes to help empower and enable staff through the use of technology, to make their working lives easier and free up time to spend with service users.”

Technology is increasingly seen as an enabler in delivering more effective patient-centred care across the NHS. “We want staff to maximise the benefits that technology can bring, and this strategy along with the investment will ensure we provide smart, flexible and reliable ways of working to support them.”

Earlier this year, the support which homeless people with mental health problems receive hit the headlines. We asked Debbie White, Director of Operations, to explain more about the work which NSFT and its partners are doing to help.

“We all have our part to play in supporting people who are homeless or at risk of becoming homeless. It’s about social care, housing and health services working hand in hand with the third sector to develop and offer effective support to meet this vulnerable group’s needs. No single service can do this alone, which is why it is so important for different agencies to join forces so that we can achieve the best possible outcomes for homeless people.”

“Homelessness is on the increase, partly as a result of unemployment, addiction and high risk lifestyles. Mental health issues can also contribute, or can develop after someone becomes homeless. At NSFT we are seeing ever increasing numbers of referrals while our patients are also becoming more complex. Undoubtedly, that puts pressure on the system and on services. “Often the first touchpoint we have with these vulnerable people will be if they are picked up by the police or are seen in hospital emergency departments. As a result, we have worked with organisations, such as St Martin’s Housing, the police, acute trusts and commissioners to develop our liaison and diversion services, which place mental health staff in A&E, police cars and police control rooms to offer immediate advice to those in crisis.”

"HOMELESSNESS IS ON THE INCREASE."

In addition, we have worked with Julian Housing to create our Criminal Justice and Liaison Service, which gives mental healthcare support to people passing through the court system who may be at risk of becoming homeless. “We have also developed specialist services aimed at veterans, who we know can be at risk of mental health issues and homelessness, and work with local prisons.”

Through the Norfolk Recovery Partnership, which is delivered by our Trust alongside the Matthew Project, we also offer drug and alcohol addiction services right across Norfolk and Waveney. “Our Norwich Community Mental Health Team has developed a closer working relationship with services such as City Reach which provides GP services to those at risk of homelessness.”

“Of course, if homelessness is a factor during an admission to one of our own mental health wards, our discharge coordinators will work with the relevant agencies to support that person moving on.”

“Our Norfolk Community Mental Health Team has developed a closer working relationship with services such as City Reach which provides GP services to those at risk of homelessness. “Of course, if homelessness is a factor during an admission to one of our own mental health wards, our discharge coordinators will work with the relevant agencies to support that person moving on.”

In Lowestoft, we are also working with Lowestoft Rising, which has been successful in securing some funding to continue their work with homeless people or those at risk of homelessness. “All of our services support referrals to social care and housing agencies so that all of the individual’s needs can be met, including any mental health issues they may be struggling with.”

“A big part of this work focuses on preventing mental health issues from becoming more serious and reaching the stage where they affect someone’s entire livelihood or lifestyle, including their housing provision.”

“There is always more that we would like to be able to do if we could, and we will continue to look at how best to use our resources to offer the best outcomes for people wherever we can.”

Turn to page 47 to find out more about the work which is taking place to support homeless people across Norfolk.

“Technology is increasingly seen as an enabler in delivering more effective patient-centred care across the NHS. “As part of this work we will be installing a second data centre which will act as a disaster recovery facility. This will be installed on a separate site to our core data centre at Hellesdon Hospital, mirroring its critical functions and ensuring there is a back-up in the event of any issues, internally or externally. This facility is due to be implemented within the next few months and will greatly improve the resilience of the Trust’s infrastructure, meaning that recent incidents, such as the Norfolk County Council fire and the global cyber attack, will not affect our systems.”

“Other monies will go on network upgrades, improvements to Wi-fi, a refresh of our Trust’s desktop and laptop computer estate and an extension of the Voice Over Internet Protocol (VOIP) telephony, so that all staff are using the same phone system.”

“The investment will be invaluable for our Trust going forward, helping to provide a more stable, secure and reliable platform for the continuation of services and the transformation of care through technology. It will also mean our ICT services are more cost effective and that better support can be provided for staff. “In addition, we have published a new Information, Communication and Technology (ICT) Strategy which helps provide a clear direction for the use of technology across the Trust, and responds to local and national strategic drivers. It also outlines how we will give staff the skills and tools to work smarter and spend more time delivering care rather than managing the business processes around care. “We want staff to maximise the benefits that technology can bring, and this strategy along with the investment will ensure we provide smart, flexible and reliable ways of working to support them.”
Lindsey Lovatt – an OT by profession – works as our Trust’s Allied Health Professional (AHP) Lead, responsible for guiding our 200 AHPs – which also incorporate art, music and drama therapists, as well as play therapists.

She also creates education and training opportunities for this vital workforce, and is drawing up a five-year strategy on how we can continue to put AHPs to best use in our services and develop them further. As part of this work she is mapping existing AHP skills and any gaps in provision to improve the AHP service further.

“AHPs are a diverse group of practitioners who deliver high quality care by carrying out assessment, diagnosis, treatment and discharge,” said Lindsey, who worked in child and adolescent mental health services for NHS England before joining our Trust last year.

“We want to develop a really first-class AHP service which complements NSFT’s other work.”

“Although most people associate these professionals as working within physical healthcare, they play an equally important role in mental healthcare too. A speech therapist might work with someone with learning disabilities or autism, while dietitians can help those with eating disorders, or patients with obesity or malnutrition issues, both of which are big problems within mental health.

“You will also find occupational therapists working within most mental health services, where they use activities to help service users to find recovery and independence. Physiotherapists will work with people with mobility issues which may be impacting their mental health, while art therapists can help people who may find it difficult to communicate verbally to express themselves through painting, drawing or sculpture.

“I’m passionate about representing a group of professionals who have so much to offer.”

“We want to develop a really first-class AHP service which complements NSFT’s other work,” she explained. “To do this, we have been looking in detail at the skills already in place across our Trust and how they are used so we can ensure the very best use of the resources we have already got.

“I’m really enjoying my role so far. It’s great to get back to my roots and I’m really passionate about representing a group of professionals who have so much to offer.”

WORK FOR US

People looking for a rewarding career in the NHS and within mental health can keep in touch and find out more about the opportunities available and what it’s like to work for NSFT via our microsite and Twitter feed.

An exciting range of career choices across Norfolk and Suffolk are available for people to view via the @NSFTjobs Twitter account and the microsite.

Available at www.nsftr.nhs.uk/work-for-us the site includes:

• Links to NSFT’s latest vacancies and full NHS jobs listings

• Videos on working for the NHS and the variety of jobs on offer

• A link to our @NSFTjobs Twitter feed

• Details of upcoming recruitment fairs and events

• Highlights of our innovative Nursing Academy

• Information on apprenticeships, work experience and temporary positions

The services provided by NSFT’s physiotherapists, occupational therapists (OTs), dietitians and speech and language therapists (SLTs), among others, is set to improve still further following the appointment of a dedicated team lead.
“We offer the time and space people need… I really enjoy what I do”

A speech and language therapist (SLT) who uses her communication expertise to help assess young people for autism has spoken of the enjoyment she gets from her varied role.

Alix Walker moved to NSFT’s Autism Diagnostic Youth Service for Suffolk (ADYSS) around three years ago after previously working with adults and children with autism and children with eating and drinking difficulties. She plays a vital role in the 10-strong multi-disciplinary team, and works alongside psychologists, a psychiatrist, an occupational therapist, primary mental health staff and a support worker to assess 180 young people with autism each year.

“I really enjoy what I do,” said Alix, whose interest in speech and language therapy (SLT) was sparked after leaving school when she worked with people with autism and challenging behaviour, which was often linked with communication difficulties.

“My passion has always been around working with people with autism and learning disabilities and supporting their communication needs. I also have a great interest in the impact which developing functional and effective communication skills and strategies has on reducing challenging behaviour.”

People with autism can have difficulties with communication, social interaction and flexibility of thought. This often impacts on their ability to understand non-verbal communication, hold a conversation, maintain relationships and respond appropriately to the thoughts and emotions of others.

"MY PASSION HAS ALWAYS BEEN AROUND WORKING WITH PEOPLE WITH AUTISM AND/OR LEARNING DISABILITIES AND SUPPORTING THEIR COMMUNICATION NEEDS."

Alix and the team will invite people who have been referred to ADYSS, along with their parents or carers, to an initial appointment, where they will gain as much information as they can by discussing their family tree, history and current situation. Where necessary, further investigations will be carried out, which could include language, learning ability and autism-specific assessments or observing the young person at school.

The team will consider whether autism is the best explanation for the differences the young person is experiencing or whether other factors, such as learning difficulties, mental health difficulties or attention deficit hyperactivity disorder (ADHD) could be having an influence.

"A DIAGNOSIS CAN HELP EXPLAIN A PERSON’S DIFFERENCES AND THE IMPACT THESE MAY HAVE."

“Difficulties with core communication skills can have a huge impact on people, affecting their confidence and their ability to interact with others,” added Alix.

“Our job as an SLT is really varied as Green Light Champion to make services and documents accessible, help develop training and awareness packages for NSFT staff and deliver Makaton training, which uses signs and symbols to help people communicate.

“Difficulties with core communication skills can have a huge impact on people, affecting their confidence and their ability to interact with others,” added Alix.

“My job as an SLT is really varied and very rewarding,” she said. “Our team are really lovely and we hope and think we do a good job of meeting the young person and their family’s needs and giving them the chance to feel heard.

“We hope we are able to offer families time and space to tell us about their journey, which may have been a long and difficult one. They may have spent a lot of time trying to understand their child’s differences over the years, so receiving a diagnosis can really help to make sense of things.”

"WE HOPE AND THINK WE DO A GOOD JOB OF MEETING THE YOUNG PERSON AND THEIR FAMILY’S NEEDS AND GIVING THEM THE CHANCE TO FEEL HEARD."
Debs Agar has worked at NSFT since qualifying in 2012, and moved to her current role within the Wellbeing and Therapy Team, on the 15-bedded Thurne Assessment Ward at Hellesdon Hospital, near Norwich, in November.

She says she “absolutely loves” her job and the variety it brings, which includes everything from supporting patients to engage in meaningful activities on the ward to preparing them for discharge by assessing their independent living skills, such as cooking, self-care and financial management.

“I originally wanted to go into teaching but changed my mind after I saw the way an occupational therapist worked with my grandma after she fell ill,” said Debs. “They enabled her to engage in activities on a daily basis, such as cooking, self-care and activities to do with their own methods to manage their own mental health with the aim of helping them to stay at home.”

Debs also plays a key role helping colleagues to develop their own skills by carrying out clinical and line management supervision within the Wellbeing and Therapy Team.

“I feel very fortunate and absolutely love my job – it’s really rewarding,” she said. “It involves lots of variety as we aim to look after the whole person and their overall wellbeing.

“When a patient is first admitted to the area I’d like to specialise in.”

For example, “I will look at the impact which mental health difficulties can have on a patient’s physical health, such as affecting their ability to cook for themselves and get the right nutrition. Once we’ve identified any issues, we will try and empower the patient to overcome them by building their own skills, maintaining independence and staying out of hospital,” she said.

She does what she can to normalise their hospital stay so that they can stick to their usual daily pattern and still take part in activities, such as going to arts and crafts sessions, the gym, or out for a coffee.

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Our nurses celebrated on Nurses’ Day and every day

Every day, our Trust’s 1,168 registered nurses go the extra mile for our patients and carers, and so we took the opportunity on Nurses’ Day to celebrate some of the exceptional work they do. Firstly, we spoke to three leading nurses at NSFT about their own roles and the vital roles that nurses play within our services.

Dr Jane Sayer is NSFT’s Director of Nursing, Quality and Patient Safety and qualified as a mental health nurse in 1990. Her ‘day job’ is to drive the Trust’s quality agenda and to represent nursing and other clinical staff on the Trust’s Board.

“I WOULD LIKE TO SAY A HUGE THANK-YOU FOR THE WORK OUR NURSES DO DAY-IN, DAY-OUT.”

With her nursing deputies, Dawn Collins and Michele Allott, the three have a clear remit to develop the Trust’s nursing and therapy workforce, to enable the Trust to deliver on its quality priorities and to ensure our service users experience the safest and highest quality services that they can. With a whole lot of work in between!

“I am still extremely proud of being a nurse and I will always be a nurse first and a director second, that will never change and really it’s what the Board wants from me,” said Jane.

“Being a nurse runs right through me and it leads everything I do. I was appointed because I am a nurse and can represent the frontline view, and the challenges that can face our staff living and breathing our services every day.

“It’s vital to ensure that our nurses are proud of what they do and of who they are. There’s nothing wrong with wearing your nursing status as a real badge of honour, you certainly work hard enough to achieve it, and you work hard every day of your career to live up to it.

“Of course, our nurses are part of a whole hard working team with doctors, therapists, and other support staff, and success always relies on these teams working hand in hand, and we thank all of those staff too and recognise their work.

“But I think we still don’t make full use of our nursing staff and their capabilities, and so many have untapped potential. We are working really hard at NSFT to put in place a clearer career progression, which allows us to get to that potential and develop and promote our nursing staff, and better reward them for what they do.

“I would like to say a huge thank-you for the work our nurses do day-in, day-out, not just because it’s their job, but because it’s extraordinary how much of a difference they make to people using our services.”

Deputy Director of Nursing, Dawn Collins, heads up the Trust’s nursing development programme.

“I’ve been a qualified nurse for more than 30 years and I’ve always remained passionate about nursing. It’s a very privileged position to hold as you enter people’s lives, often at some very low points, and they welcome you in.

“I’d agree with Jane, I don’t think you can be the voice of nursing at a senior level if you’re not hearing the voice of your nurses so you have to remain visible and approachable.

“BEING A NURSE IS SIMPLY THE WAY YOU ARE... AND I SEE GREAT EXAMPLES OF EXCELLENT NURSING EVERY DAY.”

“You’re the conscience of the nursing staff at a senior level and if you don’t hear that message from them and see the challenges they face then you can’t bring that flavour to the decision making you’re influencing.

Continues on next page >>

Why do you work in mental health?

Jane Sayer: “Because it values the whole person, and because the answers aren’t easy. It’s both a privilege and a challenge to be with someone at their most vulnerable and hold the hope for them.”

Dawn Collins: “I moved into mental health nursing and learning disabilities only two years ago to broaden my portfolio and stretch myself in a new field.”

Michele Allott: “Once I found mental health and the philosophy of how we offer care I knew it was the right match for me.”

What makes you proud to be a nurse?

Jane Sayer: “We do the small things that make the difference to people at a fundamental level. Sometimes that means doing the jobs that no-one else wants to do, and without removing people’s dignity.”

Dawn Collins: “The humble and privileged position you have to help someone at often the lowest moments of their lives.”

Michele Allott: “Seeing how all of our teams pull together when times are tough and make sure that those who need our support and compassion receive great care. CQC have twice rated our staff as caring. That’s what makes me proud.”

What would you tell yourself as a young nurse?

Jane Sayer: “Cherish your colleagues, and keep your role models in mind.”

Dawn Collins: “Don’t take life too seriously, and be confident and proud of who and what you are.”

Michele Allott: “Do it all again, but sleep more and party less (maybe). And always remember why you became a nurse and stick to those values and principles.”
So I packed away my monetary work before. I had considered social interactions and feeling the difference you can make, perhaps to one person in some small way.

“There’s nothing wrong with taking the time to recognise the commitment of nurses as a body of our staff within our teams and in promoting the value of a career in nursing as one of the most rewarding you can have. “During my time in nursing there have been lots of exciting times and opportunities as well as challenges. Who’d want to do anything else?” Michele Allott, Deputy Director of Nursing and Patient Safety, laughingly recalls how it was the lure of a handsome man that inspired her to take up a nursing career.

“I was about to take a job working for the Bank of America, but talking to this guy who was training to be a mental health nurse, reminded me that I’d always wanted to work with people and, had considered social work before.

“So I packed away my monetary aspirations and decided to go with my heart – about the job that is, not the fella. I was accepted on a training course, started the week after, and I qualified in 1985. “After being told off by a senior nurse while I was working on a physical healthcare ward for comforting a patient who only had a short while to live, the decision to specialise in mental health was an obvious one for me. I was always interested in the person, not just the illness. My current role still provides me with the opportunity to make sure that we support great care by making sure that compassion and safety are at the heart of what we do.”

“I don’t think I’ve ever regretted it. Being a nurse is simply the way you are and I remain as dedicated to good nursing in mental health today as the day I made that decision. And I see great examples of that excellent nursing every day.”

NSFT is encouraging members of the public to show their support for its nurses on social media by using the hashtag #nurseheroes

“I CAN REALLY MAKE A DIFFERENCE IN SHAPING CARE WE OFFER SERVICE USERS AND THEIR CARERS...”

Jura West has worked with NSFT for just under 30 years and says, as a nurse it’s never too late in your career to continue to learn and develop your role and take a new nursing direction. “I’ve worked my way from being a ward-based staff nurse working with older people, to being a clinical team leader, and more recently to becoming a research nurse, leading our research development programme for dementia in later life in Norfolk.

“I’ve always felt it important to try and develop my skills and keep things fresh. The move into the research role has made me think differently about my own practice. Ultimately, all of us should all question why we do things, the way we do and to make sure our practice is evidence-based.

“In return, I’ve been able to bring lots of clinical experience to the new role and it has given me the opportunity to study at a level I didn’t think would be achievable. When I first started out I would never have thought my career would have gone in this direction.

“Working for our Trust as a nurse has given me with many opportunities to progress and get involved and be part of the bigger picture. Now I feel like I’m helping to question the interventions and treatments we offer around dementia, so I can really make a difference in shaping the care we offer to service users and their carers.”

“I MY JOB IS SO VARIED AND UNPREDICTABLE...AND THERE ARE LOTS OF OPPORTUNITIES TO BE CHALLENGED...”

Nicole Crabtree is a Clinical Team Leader, working in our Longterm Treatment and Residential and Supported Living Team, in Central Norfolk. "Nursing is a career I have always wanted to be a part of. I had nursing role models in my family, including my aunt and grandmother. My mother suffered with depression and I saw how she was supported and treated and this inspired me to want to help people with similar illnesses.

“I felt that a job working as a mental health nurse would really merge these two interests, and nursing was a career I could progress in and the job would be forever evolving.

“Being a nurse allows me to work with service users through their recovery. I can see them at their worst and then work with them as they take steps to recover.”

“I LOVE MY JOB... IT COMBINES MANAGEMENT AND PATIENT CONTACT, WHICH I REALLY ENJOY...”

Howard Muzire is a charge nurse working on Thorpe Ward, at the Norwich Clinic, near Norwich, as part of our secure services. “Nursing is really rewarding. I enjoy interacting with patients, while part of my role is to ensure high standards of care and to have awareness of exactly what is happening with all the patients on my ward.

“I love my job. It’s perfect for me as it combines both management and direct patient contact, which I really enjoy. I still get to complete things such as care planning, risk assessments and one-to-ones, which is the reason I decided to do the job in the first place,” he said.

“I studied mechanical engineering back in Zimbabwe before moving to England in 2002. I did some work caring for vulnerable people and realised I would be more useful as a nurse than an engineer! I also realised I’d get great job satisfaction by seeing people getting better.

“As well as my work on the ward, I train colleagues in supporting people with personality disorders. I’ve really enjoyed spreading the message that personality disorders are treatable, and there is light at the end of the tunnel. We are helping to change people’s attitude which is so satisfying.

“I’m also the carer’s lead for secure services, which I find really rewarding. Carers play such a vital role – it’s important for us to look after them too.

“I very much enjoy my job and would recommend a career in nursing to anyone.”

DURING MY TIME IN NURSING THERE HAVE BEEN LOTS OF EXCITING TIMES AND OPPORTUNITIES AS WELL AS CHALLENGES. WHO’D WANT TO DO ANYTHING ELSE?”

Words from Michele Allott, Deputy Director of Nursing and Patient Safety...

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“She was the type of nurse I wanted to be... caring... approachable... and firm”

Annabella Hudson, Deputy Service Manager with our Children, Families, and Young People’s services based at Thurlow House, in King’s Lynn tells Insight how her mother’s ill health and an expert nurse inspired her to become a mental health nurse herself.

From a young age I knew that I wanted to care for people. My mum experienced mental health difficulties and I often found that I didn’t know what to say to her or how to help her. I saw her taking different medication and I always wondered why.

“At one stage mum began to see a mental health nurse and, as time passed, she got a bit better. At this point I was coming towards the end of my A-levels and I had to decide on my career.

“I applied for a forensic psychology course and at the same time I applied to be a nurse in King’s Lynn. I was drawn towards mental health.

“During my nurse training I was fortunate to meet some inspirational mentors, some of which still work for our Trust. I even met the nurse who used to see my mum!

“She was the type of nurse I wanted to be – she was approachable, down to earth, kind, caring, firm but very fair and I wanted to be just like her.

“It was 16 years ago that I qualified and I’ve stayed with our Trust and worked in many areas and with all ages. I’ve continued to climb the ladder and I’m very proud of what I have achieved and with the nurse that I have grown to be.

“I’m now studying hard and have been fortunate enough to have the Trust’s support to continue with my Masters studies and have just been appointed to a new role as an Advanced Nurse Practitioner.

“IT WAS 16 YEARS AGO THAT I QUALIFIED AND I’VE STAYED WITH OUR TRUST AND WORKED IN MANY AREAS AND WITH ALL AGES.”

“I could not be more excited about this opportunity, which opens the door for many practitioners out there like me.”

Making the most of our nursing matrons

Over the past two years our Trust has welcomed new matrons and deputy matrons across Norfolk and Suffolk, overseeing the clinical nursing care in all areas. Lianne Nunn was one of our first appointed matrons, working in Suffolk and she describes the role they play.

Both matrons and deputy matrons are fundamental to the way our Trust now operates, and they are really helping to drive through our quality improvements.

“These are exciting times and already we are noticing a positive difference in the provision of high quality care and in staff morale,” said Lianne.

“We act as a critical friend in a way as we work alongside the services but can step back from the hands-on management.

“It was 16 years ago that I qualified and I’ve stayed with our Trust and worked in many areas and with all ages. I’ve continued to climb the ladder and I’m very proud of what I have achieved and with the nurse that I have grown to be.

“IT WAS 16 YEARS AGO THAT I QUALIFIED AND I’VE STAYED WITH OUR TRUST AND WORKED IN MANY AREAS AND WITH ALL AGES.”

“And a large part of the role is to support our service users and carers in having their voices heard within the organisation.

“These are exciting times and already we are noticing a positive difference in the provision of high quality care.”

She has been a matron with NSFT since August 2015 after moving from her role as a clinical team leader with the Access and Assessment Team, in Suffolk.

Now based at Mariner House, in Ipswich, she went on to explain:

“WE ACT AS A CRITICAL FRIEND IN A WAY AS WE WORK ALONGSIDE THE SERVICES BUT CAN STEP BACK FROM THE HANDS-ON MANAGEMENT.”

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“As matrons, we provide a real focus on quality, governance, professional standards and ultimately, on improving patient experience.

“We act as a critical friend in a way as we work alongside the services but can step back from the hands-on management. We get an overview of the services and challenged areas which require improvement, while supporting our colleagues at the same time.

“I became a matron as that focus on quality really appealed to me, and I’ve always been interested in improving patient care. Now I get all the time I need to look at this.

“The variety of the role is great too. As we each work across a locality, or geographical area of our Trust, we can touch any team within that, so I will work with teams ranging from learning difficulty inpatients services to Wellbeing Suffolk, and access and assessments services to the autism diagnostic service.”

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Norfolk and Suffolk NHS FT (NSFT)
Helping the next generation into their dream career

A new apprenticeship scheme which gives the next generation of aspiring nurses the chance to realise their career aspirations and earn while they learn has been launched in west Norfolk.

The West Norfolk Cohort gives existing staff and new recruits the chance to complete an 18-month higher apprenticeship, which is the equivalent of a foundation degree. Those who wish to will then be given the opportunity to continue with their studies and work towards a nursing degree.

The scheme is being spearheaded by NSFT, in partnership with The Queen Elizabeth Hospital (QEH), Norfolk Community Health and Care NHS Trust and the University of Suffolk. Its aim is to attract new nursing students to the area while also supporting existing health or social care assistants to train to become registered nurses.

Dawn Collins, NSFT’s Deputy Director of Nursing, explained: “Our Trust is invested in developing our own next generation of staff. Throughout the NHS we are all working towards a nursing degree. The scheme is being spearheaded by NSFT in partnership with The Queen Elizabeth Hospital (QEH), Norfolk Community Health and Care NHS Trust and the University of Suffolk. Its aim is to attract new nursing students to the area while also supporting existing health or social care assistants to train to become registered nurses.”

Emma Hardwick, Director of Nursing at the QSH, said: “This is an exciting opportunity for health or social care assistants to ‘earn while they learn’. For some people, going to university is not an option but this apprenticeship scheme will open a door into nursing for them.

“The response to the launch was wonderful and the people who attended showed great passion and enthusiasm for a career in nursing. “We are pleased to work with our partners to offer this exciting opportunity and ensure the high standard of care for our future Patients.”

Successful applicants will complete face-to-face learning and web lectures before demonstrating what they have learned on the wards. After completing the course, they will be able to continue working as an assistant practitioner or continue their studies to become a registered nurse.

For more information contact Jane Stringer, Talent for Care Careers Facilitator, on 01603 421564 or by emailing jane.stringer@nsft.nhs.uk

Top award for hard-working Peter

Peter Luff, who works in NSFT’s Forensic Community Mental Health Team has not looked back since embarking on an 18-month Foundation Degree in Mental Health Practice course at City College Norwich, and was delighted to receive the special award during a ceremony at Norwich Cathedral.

He said: “After working in mental health for 23 years, further education had never been something that was on my radar. Naturally I am quite a shy person, and had to push myself to enrol on the course in the first place. It was a shaky start while I adapted to intense learning and juggling my studies with my full-time job.

“I AM FULL OF ADMIRATION FOR STAFF THAT DO THIS.”

Going to pick up my apprenticeship certificate. I went along and was met by my lecturer who confirmed that I had been nominated for the Higher Apprentice of the Year Award.

“I think the lightbulb moment came during my last semester when I saw a real change in myself. I was enjoying the course content and my tutors could see this in my work. One day I checked my college email and came across a message inviting me to the apprenticeship awards ceremony.

“I assumed it was part of the course requirements to attend and that I was going to pick up my apprenticeship certificate. I went along and was met by my lecturer who confirmed that I had been nominated for the Higher Apprentice of the Year Award.

“Peter was modest and very flattered that I nominated him for the award, but it was well deserved. He is a conscientious student who is very professional in his attitude and behaviour. Peter developed along a journey of learning where he demonstrated critical analysis, reflection and made vital links between theory and practice.”

Kim Boggan, Talent for Care Lead at NSFT said: “Completing an apprenticeship while working full time is not easy task and I am full of admiration for staff that do this. I am so pleased Peter has had his hard work recognised and his achievement is worthy of his efforts. He is a great example of how undertaking a higher apprenticeship can increase confidence and self-belief, as well as knowledge.”

“THIS PARTICULAR APPRENTICESHIP OPENS UP OPPORTUNITIES FOR STAFF, SO IT’S A GREAT QUALIFICATION TO HAVE IF YOU ASPIRE TO DEVELOP INTO PROFESSIONS SUCH AS NURSING.”

Peter now has a taste for teaching as well as learning, would like to develop these skills further and is looking towards additional study. He said: “I now volunteer delivering personal safety sessions to students completing placements in our services, which is something I could never imagine myself doing before.”
Norfolk and Suffolk NHS FT (NSFT)

my hard work had finally paid off. “I was delighted when I was offered face-to-face contact with the patients. Nurses and team leaders who have big machine by helping the doctors, I am able to play a small role in a and what the Trust does. Even though been passionate about mental health through which I could learn. “I absolutely love my job and was really pleased when I was offered a permanent position,” said Rebecca, who lives in Norwich. “I now lead visits to care homes across Norfolk to monitor patients and report back to the nursing team who may then change their medication as a result. “My team is really supportive and allow me to work flexibly so that I can spend one day each week either at the University of Suffolk or studying. Some of the people in my team are also completing the same course, which is great as we are a support system for each other. I have been really lucky that I’ve been able to take my studying to the next level. My apprenticeship opened the door for me and is going to take me all the way through to degree level. I couldn’t recommend it enough.”

For more information about apprenticeship opportunities at NSFT, contact Jane Stringer on 01603 421564 or by email at jane.stringer@nsft.nhs.uk

The NSFT Leadership Academy is giving managers at all levels, including clinical staff such as matrons and team leads, the chance to develop their own skills to ensure strong leadership across our Trust, both now and in the future. Its overall aim is to create a culture which makes our Trust a great place to work, train and receive care and it follows the successful introduction of a Newly Qualifieds Academy to help staff make the transition from university to the workplace around two years ago. The Leadership Academy is part of our Trust’s strategy to attract, develop and grow our own workforce as staff shortages continue to pressure the NHS, with the ultimate aim of further to work, train and receive care. Our aim is to create excellence in leadership and service users and their carers. “We want everyone we employ to reach their full potential. This academy is helping our managers to do just that, making our Trust stronger and benefiting those who use our services. Our aim is to create excellence in our leadership and make our Trust an even better place to train, work and receive care. “The academy is allowing us to develop our leaders of today, supported by a ready pipeline of talented aspiring managers with the right skills and behaviours to meet the needs of our Trust, now and the future. It is helping us to encourage innovation, develop appropriate leadership capability and effectively manage talent within our organisation so that we can plan for the longer-term.

"The academy is allowing us to develop our leaders of today, supported by a ready pipeline of talented aspiring managers."

"Offering opportunities for further development will also have a positive impact on our staff retention rates, as it will help attract the best new staff into our Trust while also enabling us to invest in those who are already working hard for us every single day."

Take your first steps on the “ladder of opportunity”

Healthcare staff who have used an apprenticeship to help them climb the career ladder have spoken of earning while they learn.

The apprenticeship gave me the opportunity to join a good organisation while also studying for qualifications which were relevant to my day-to-day work,” said Luke, who lives in New Costessey, in Norfolk. “It offered a great alternative to university and a different route through which I could learn. “I really enjoy my job and have always been passionate about mental health and what the Trust does. Even though I am not clinical, I like the fact that I am able to play a small role in a big machine by helping the doctors, nurses and team leaders who have face-to-face contact with the patients. “I was delighted when I was offered a permanent job and felt like all of my hard work had finally paid off.

"I’m looking forward to earning more qualifications and moving up in the Trust and eventually go into project management. Ideally, this would be with NSFT as I personally received care from the Trust when I was younger so would like to give something back. “I would highly recommend apprenticeships. It has opened the door to my ideal job and given me the chance to get a foot on the ladder in the NHS, which is brilliant.” NSFT also offers apprenticeships in clinical roles for those keen on working directly with patients and service users, such as Rebecca Bilham, who joined the Trust as an apprentice Clinical Support Worker in 2015. The 19-year-old was offered a permanent position with the community Dementia Intensive Support Team after finishing her apprenticeship last summer. She is now mid-way through a two-year Assistant Practitioner Foundation Degree and hopes to go on to qualify as a mental health nurse in the future.

"I absolutely love my job and was really pleased when I was offered a permanent position," said Rebecca, who lives in New Costessey, in Norfolk. "I now lead visits to care homes across Norfolk to monitor patients and report back to the nursing team who may then change their medication as a result. “My team is really supportive and allow me to work flexibly so that I can spend one day each week either at the University of Suffolk or studying. Some of the people in my team are also completing the same course, which is great as we are a support system for each other. “I have been really lucky that I’ve been able to take my studying to the next level. My apprenticeship opened the door for me and is going to take me all the way through to degree level. I couldn’t recommend it enough.”

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New appointment helps staff speak up freely

A new kind of guardian responsible for helping members of staff to raise any concerns about patient safety, with the ultimate aim of further improving care, has been permanently appointed at NSFT.

Liz Keay became the Trust’s Putting People First Guardian (otherwise known as the Freedom to Speak Up Guardian) earlier this year after a successful six-month trial.

Liz works independently and provides confidential advice and support to any member of staff who raises a concern while escalating cases to the right level, so that they can be resolved efficiently. She will report any themes or learning back to our Trust Board, while promoting a culture of listening across NSFT which encourages staff to speak out safely.

“Some people just want to chat through an issue with an independent person and will then deal with it themselves.”

Her role builds on the strong foundations already in place at NSFT, which has had a whistleblowing policy in place for several years to encourage openness and transparency.

“I have really enjoyed fulfilling the role so far and a lot of it focuses on building good relationships with people, which links closely to the work I have done around the Trust’s values,” said Liz. “Feedback has been very positive and people have welcomed the idea, and I’ve already heard how changes have been made as a result of the input from the new role, which is very rewarding.”

“I dealt with around 18 cases during the pilot, and found that some people just want to chat through an issue with an independent person and will then deal with it themselves. While others may need support with an investigation being set up to look at the concern in more detail.”

“People can get in touch by calling or emailing, and we also offer staff the chance to leave anonymous messages if they would prefer. We want people to feel confident and comfortable reporting any concerns they may have so that we can work together to provide better services, and ultimately better care for our service users and patients.”

“Some people just want to chat through an issue WITH AN INDEPENDENT PERSON AND WILL THEN DEAL WITH IT THEMSELVES.”

ANWEN CELEBRATES LEADERSHIP SUCCESS

An NSFT Clinical Pharmacy Manager is celebrating after passing a special course designed to help develop the next generation of NHS leaders.

Anwen Metastasio, who is based at St Clement’s Hospital, in Ipswich, has completed the six-month Mary Seacole Programme, which provides knowledge and skills in leadership and management.

The programme is run by the NHS Leadership Academy and is aimed at people in both clinical and non-clinical roles who are thinking about their first formal leadership or team management position. It is assessed on four key elements: completion of online content, attendance at all three workshops, meaningful contributions to the online discussions and a final written assignment.

“The course looked at self-awareness and the impact which my personal qualities have on the way I lead a team,” said Anwen. “It also helped me to see how a good team can work together more effectively, which has been really useful in my daily work.

“One of the really good things about the programme was that it was multi-disciplinary, so involved a really nice balance of people from various professions, as well as people from non-clinical roles.”

He will also lead and manage all of the county council’s services for mental health and learning disabilities, together with their commissioning budget for these services.

Michael Scott, NSFT Chief Executive, said: “We are delighted that Pete has been appointed to this innovative new post. The panel was struck by his passion and vision for the role and look forward to working with him closely over the coming months to realise our vision of bringing health and social care together.

“He will focus on making sure our service users and patients receive seamless services, regardless of who is providing them.”

This a first-of-its-kind fully integrated director post to jointly lead the mental health and learning disabilities services across Suffolk, on behalf of Norfolk and Suffolk NHS Foundation Trust (NSFT) and Suffolk County Council (SCC).

Pete will build on the existing partnership between the county council and local mental health trust which sees social workers from the council operate as part of integrated mental health teams.

“Pete will focus on making sure our service users and patients receive seamless services, regardless of who is providing them.”

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“He will focus on making sure our service users and patients receive seamless services, regardless of who is providing them.”
“My dream was to change my life… I never expected to be where I am today”

An Assistant Practitioner who spent his childhood living in a Zambian refugee camp after fleeing war in the Congo has spoken of his gratitude at being given the chance to change his life and pursue a rewarding career.

E

his Beya, his parents, five brothers and sisters moved to Norwich around 10 years ago after being offered help to escape the violence in Africa by the Gateway Protection Programme. Since then, the 27-year-old has concentrated on his education before working for the NHS, first with the ambulance service and more recently with NSFT. Now an Acting Assistant Practitioner working in the Section 136 Suite at Hellesdon Hospital, Elvis is also studying for a foundation degree in mental health science and hopes to go on to a degree in mental health. Elvis is also studying for a foundation degree in mental health science and hopes to go on to a degree in mental health.

“JOINING NSFT HAS GIVEN ME AN OPPORTUNITY TO BUILD ON THE GOOD THINGS IN MY LIFE. THE TRUST IS SO SUPPORTIVE AND HELPFUL AND I AM REALLY Grateful.”

“When we moved to Norwich we didn’t know anything about the city so it was difficult at first, but now it is more multicultural, people are more integrated and there is a lot more acceptance of ethnic minorities.”

“In the vote of thanks I spoke about my experience but made particular mention of the mentors, who we are assigned to when we take up a placement. They really do shape your nursing practice.”

In addition, 32 students recently graduated with Foundation Degree in Health Care Practice (Mental Health) from the University of Suffolk and City College Norwich. Among them was Tracy Gass, who works at Cedar House, at St Clement’s Hospital, in Ipswich. She said: “I never imagined I would go to university, especially this far into my career.”

“It was hard work but well worth it. I graduated six days before my 50th birthday, which just goes to show you’re never too old.”

Fellow graduate Samantha Watson, Assistant Practitioner with the Crisis Resolution Home Treatment Team (CRHT), said: “When I started the course I found it daunting, but having that final moment, dressed in my certificate, was amazing and like no other experience I had ever had.”

“Joining NSFT has given me an opportunity to build on the good things in my life. The Trust is so supportive and helpful and I am really grateful.”

“For information on the Foundation Degree, role of assistant practitioner or the Work-Based Learning pathway, email talentforcare@nsft.nhs.uk”

Mental health students celebrate their degrees

Students planning careers as mental health nurses have taken a major step towards realising their dream after recently graduating from courses at the University of Suffolk and City College Norwich.

Two courses have taken place – a Bachelor of Science (BSc) in Mental Health Nursing and a Foundation Degree in Health Care Practice (Mental Health) – with students graduating from both at the end of last year.

Students who completed the BSc can now register with the Nursing and Midwifery Council as mental health nurses. Among them was Simon Sparrow (45), who works on Lark Ward, a Psychiatric Intensive Care Unit, at Woodlands Unit, in Ipswich. He received his degree from the University of Suffolk after three years’ study and work placements within NSFT, and was the first mental health student to be given the honour of making the vote of thanks speech at the graduation ceremony in Ipswich Town Hall.

He said: “I had always had an interest in mental health nursing and was really keen to do my training. The BSc course consisted of academic study and placements across NSFT over the three years. “My interest was in acute mental health nursing, so I applied and was accepted to work at Lark Ward. It’s a great career, it’s fascinating and you meet some wonderful people.

The Foundation Degree qualification is the equivalent to the first 18 months of the BSc. Graduates are now able to work as assistant practitioners, while those who wish to become nurses can apply for the Nursing and Midwifery Council-approved Work-Based Learning Pathway.

For information on the Foundation Degree, role of assistant practitioner or the Work-Based Learning pathway, email talentforcare@nsft.nhs.uk For information about the BSc (Hons) Mental Health Nursing degree at the University of Suffolk, visit www.uos.ac.uk/courses/bachelor-hons-mental-health-nursing

S8 Norfolk and Suffolk NHS FT (NSFT)
Lowestoft, Bury St Edmunds and
Norwich. This is a great opportunity
to get involved and make the Trust
facilities even nicer for service users
and staff."

"I AM SURE THIS EXPERIENCE
WITH PATIENTS WILL BE
REALLY HELPFUL WHEN
CHOOSING A FUTURE
CAREER. I STILL DON’T KNOW
EXACTLY WHAT I’D LIKE TO
DO, BUT I AM SURE I WOULD
LOVE TO WORK WITHIN
MENTAL HEALTH."

Among those who have taken up
roles with the Trust is Yagmur Ozsoy,
20, who is currently volunteering as
a dementia activity group assistant
at the Julian Hospital, in Norwich.
"I have never volunteered for
anything before and so thought this
would be the perfect opportunity to
help out my local community," said
Yagmur, who is studying psychology
at the University of East Anglia.
"Talking to people is very important;
it makes them feel involved and
listened to. I’m very much enjoying
socialising with the patients at
the Julian Hospital. Thanks to this
experience, I understand that people
should not be judged because of
their illness."

Yagmur volunteers with a group
which is managed by Assistant
Practitioners Shirley Wright and
Susan Kent.
Shirley said: "Sue and I feel that
having volunteers to share the
workload during the sessions has
enabled us to concentrate more on
the clinical side of our work, such
as writing notes and arranging
transports, as well as meeting the
patients’ needs."

Denise Jones, 54, volunteers as
a ‘meeter and greeter’ at Kirkley
Cliff, in Lowestoft. She started
volunteering with NSFT because she
felt the need to put her spare time
to good use.

"THE PATIENTS REALLY
ENJOY HAVING VOLUNTEERS
AROUND AND LIKE TO
INTERACT AND SHARE
STORIES WITH THEM."

"Volunteering is boosting my
confidence and giving me some
worthwhile work experience," said
Denise. "It is a pleasure meeting
different people and I enjoy the fact
that I contribute to a service which
will benefit others."

VOLUNTEER WITH US
Volunteer roles include
companionship at mealtimes,
becoming a dementia buddy,
playing games with patients and
encouraging service users to
complete surveys to help drive
through improvements.
Anyone who would like
more information about
volunteering with the Trust,
or to check the posts currently
available, should visit
www.nsft.nhs.uk/volunteer
or call
01603 421348
or email
volunteer@nsft.nhs.uk

Volunteer recruitment campaign
doubles numbers
As national Volunteers’ Week is celebrated around the UK in June our Trust’s
campaign to recruit local people to volunteer with NSFT has been hailed a
success after the number giving up their time to help service users and staff
nearly doubled within just nine months.

Almost 70 volunteers are
now active across our
Trust, and work across
a variety of roles to
improve our services. They include:
• Sports motivators – who work with
assistant practitioners to help service
users take part in sports and get
the best out of their gym sessions
• Dementia activity group volunteers –
who help with cognitive stimulation
therapy groups for people with
dementia, by welcoming them
to sessions and offering support
throughout the activities
• Carers helpdesk volunteers – who
work on the Thurne Ward at
Hellesdon Hospital to support
friends and family who are visiting
their relatives
• Spiritual support volunteers – who
help the Trust’s chaplaincy team to
facilitate reflective worship, chat
with service users about spirituality
and run Tai-Chi workshops
Kim Boggan who oversees voluntary
services at NSFT, said: "Volunteers are
a great asset to our Trust and a real
support to NSFT’s 4,000 staff to help
them deliver even better services.

"We have attracted volunteers from
all walks of life. They are showing
great passion and commitment,
which is incredibly rewarding for
everyone involved.

"Many of our volunteers have
personal experience of living with
mental health issues, and through
volunteering they provide valuable
inspiration and insight to service
users and staff alike.

"At the moment we are looking
for volunteers with green thumbs
to help with the maintenance and
improvement of our gardens in

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90 Norfolk and Suffolk NHS FT (NSFT)
A former NSFT medical secretary whose thirst for knowledge prompted her to study for a degree in mental health nursing is now preparing for her next challenge – spending three weeks volunteering in a mental health unit in Dar Es Salaam, in Tanzania.

Karen Olsson, from Norwich, joined our Trust in 2005 as a medical secretary with the Central Norfolk Child and Adolescent Eating Disorders Service, at the Beethal Child and Family Centre, in Norwich.

Inspired by the care she saw colleagues deliver every day, she decided to move into a clinical role, first qualifying as a Clinical Support Worker (CSW) before completing a foundation degree and becoming an Assistant Practitioner. The 46 year-old prompted her to study for a degree in mental health nursing is now preparing for her next challenge – spending three weeks volunteering in a mental health unit in Dar Es Salaam, in Tanzania.

"From the moment I started working in mental health, I found it fascinating and soon noticed that I was asking lots of questions," said Karen, who is in the second year of her course and hopes to specialise in dementia care after she qualifies.

"I'm really excited to get out there and get a good result for the year so far – doing the degree was among the best decisions I've ever made. I'm really excited to get out there and get a good result for the year so far – doing the degree was among the best decisions I've ever made. It is a real privilege to be able to get to know someone so that they feel comfortable letting you in, and a skill to be able to read their body language and encourage them to open up. When you do all of that right and get a good result for the patient, it's absolutely fantastic."

Karen to learn more and move out of her comfort zone, she is travelling to Tanzania in August, and will share her knowledge there while learning more about how patients are treated in different countries. She will take a range of donated medical equipment with her, and is raising around £3,000 to help fund the trip.

"I don’t want to go out there with any preconceived ideas - I just want to immerse myself in the experience," added Karen, whose husband Marc works for our Trust at the Norvic Clinic, in Thorpe St Andrew.

"I'm not sure how patients with mental health problems are treated in Tanzania. All the time I'm there, I'll be comparing and contrasting the two models of care and look forward to discussing them with the other volunteers.

"I've been blown away by how generous people have been with their donations so far and would like to thank everyone for their support. I'm really excited to get out there and push myself out of my comfort zone. It will be a really important life experience which will further build my confidence while helping me to become the mental health practitioner I want to be."

Karen’s trip has been organised through the Work the World charity. To donate, visit www.myeljective.ollsson.co.uk/donate.php

"We are now looking for anyone with relevant professional experience."

"Refugees at Home has done some great work in London to partner homeless refugees with short-stay hosts," said David, who is based at Hellesdon Hospital, in Norwich, and carries out home visits to prospective hosts. "They work within strict guidelines both for hosts and refugees, making this a really good, safe solution for everyone.

"They have placed nearly 320 people since the charity launched in October 2015, and provide a vital service connecting people who have room to spare with asylum seekers and refugees in need of accommodation.

“We are now looking for anyone with relevant professional experience so far – doing the degree was among the best decisions I’ve ever made. It is a real privilege to be able to get to know someone so that they feel comfortable letting you in, and a skill to be able to read their body language and encourage them to open up. When you do all of that right and get a good result for the patient, it’s absolutely fantastic.”

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COULD YOU HELP A REFUGEE IN NORWICH?

A Complaints Officer with NSFT is appealing for kind-hearted people with a few hours to spare to volunteer to help refugees and asylum seekers settle in Norwich by offering short-term accommodation or becoming a mentor.

David Wain volunteers with Refugees at Home, which has teamed up with local charity New Routes Integration to find temporary housing for people in desperate need by linking them with others who have generously offered to act as hosts.

He is appealing for other people with professional experience as social workers, health visitors, district nurses or mental health practitioners to volunteer to visit and vet potential hosts before placements are made.

“We are now looking for anyone with relevant professional experience.”

“Refugees at Home has done some great work in London to partner homeless refugees with short-stay hosts,” said David, who is based at Hellesdon Hospital, in Norwich, and carries out home visits to prospective hosts. “They work within strict guidelines both for hosts and refugees, making this a really good, safe solution for everyone.

“They have placed nearly 320 people since the charity launched in October 2015, and provide a vital service connecting people who have room to spare with asylum seekers and refugees in need of accommodation.

“We are now looking for anyone with relevant professional experience to step forward and volunteer and help get this scheme off the ground in Norwich.”

Michael Scott, NSFT’s Chief Executive, said: “I am always in awe of the hard work and compassion of our staff and the fact that this extends to their personal time.

“So many get involved with charitable endeavours to support their local communities, which is fantastic news and should be applauded.”

For more information about Refugees at Home or to sign up to help, visit www.refugeesathome.org/ For information about ways to get involved with organisations which support refugees in Norwich, or about mentoring and befriending, contact development@newroutes.org.uk

In your words...

“I felt that my care was very specific to me as a person and they made me feel like I mattered and that I deserved the care they gave me at my lowest moments.”

Service user
Astonishment and Duty team, 80 St Stephens, Norwich

“You have been more than just a nurse. You have supported us and for the first time I’ve felt someone cares. You are fantastic at what you do and I do thank you from the bottom of my heart for all you have done.”

Family of a service user
Community mental health nurse, Northgate Hospital

“You thank you for all the help and encouragement you have given me over the last six months. At the beginning of this year I couldn’t have got any lower, I thought I had lost everything. You’ve made me believe in myself again and given me the confidence to carry on when I thought I couldn’t.”

Service user
Chatterton House, King’s Lynn

“Thank you for the excellent service from the first contact with the wellbeing appointments to the one-to-one. The extremely professional therapist was compassionate but firm, which is what I needed. I respected his judgement and his time.”

Service user
Wellbeing Norfolk and Waveney

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Dr Yasir Hameed, who is based at the Julian Hospital, in Norwich, has become one of just five specialists to receive the Early Career Psychiatrist Scholarship after demonstrating exceptional clinical practice, leadership, research innovation and management skills.

As a result the EPA funded his attendance at the International Congress of Psychiatry, in Florence, Italy, in April, which focused on subjects such as parental mental health, adolescent psychiatry and personality disorder. Dr Hameed hopes to use the visit to share learning while also bringing back best practice from across Europe which could benefit service users locally.

“BEING PART OF THE CONGRESS WILL ALLOW ME TO TAP INTO EUROPEAN EXPERTISE AND SHARE IDEAS WITH MY OVERSEAS COLLEAGUES.”

It comes shortly after the findings of a research study, in which Dr Hameed played a key role, were published in the American Journal of Psychiatry in February 2017. Called SEPEA (Social Epidemiology of Psychiatry in East Anglia), the study identified 687 young people, aged between 16 and 35, who experienced their first psychotic episode from a population of over 600,000 people living in East Anglia over three-and-a-half years.

The study highlighted the significant differences in psychosis prevalence between urban and deprived areas compared to rural and wealthy regions.

“Winning the scholarship has been the product of many years of hard work and many more applications along the way,” said Dr Hameed, who was especially delighted to receive the award as the EPA receive hundreds of applications from psychiatrists across Europe every year, making it extremely competitive.

“Being part of the congress will allow me to tap into European expertise and share ideas with my overseas colleagues. This will provide me with the opportunity to bring methods of best practice back to our Trust, which will ultimately benefit our service users and patients.

“Psychiatry is an international specialty, with the UK learning a lot from much of Europe and the rest of the world. The congress will be a chance for some of the world’s leading psychiatrists to share ideas and methods of best practice.”

Dr Hameed first began his psychiatry training with NSFT in 2010 and has received many accolades for his work. He was shortlisted as one of four finalists in the Royal College of Psychiatrists Awards 2015 in the Higher Psychiatric Trainee category, and has also been nominated in the Unsung Hero category in NSFT’s Putting People First Awards.

Dr Hameed has also been named as a ‘mental health hero’ by the Eastern Daily Press newspaper, which celebrated his work and achievements as part of its Mental Health Watch campaign in November 2015.

For more information about the scholarship, visit www.epa-congress.org

To read the study, go to http://ajp.psychiatryonline.org/doi/abs/10.1176/appi.ajp.2016.16010103

Hanks to their efforts, our Trust finished seventh nationally with 120 members of staff in 23 of our sites racking up an amazing total of 798,858 points in the national competition we badged Liven Up Your Lunch.

Alison Thomas, NSFT’s Staff Health and Wellbeing Lead, explained: “Liven Up Your Lunch was our Trust’s take on the eight-week national activity challenge.

“We encouraged everyone to do small bite-sized activities in their lunch break, and every week we sent out suggestions for activities.

“Our staff really embraced the challenge. As well as the usual running and walking, staff threw themselves into some dancercise, aeroibcs, and the odd session of keepy-uppy.”

“The competitive and supportive element seemed to really motivated some people, so we will definitely take part again next year.”

She explained that it was all about encouraging our staff to make small changes, which make all the difference to their own physical and mental health.

Workplaces across the country took part and logged their activities to earn points to climb the national leader board.

Lorraine Parkinson, manager for the Neuro Pathway and Complexity in Later Life teams at Mariner House, in Ipswich, came out top when she collected more than 30,000 points to win a Fitbit. Staff at Endeavour House, in Ipswich, won the prize for best team and received £200 to spend on sports equipment.

Staff liven up their lunch and get fit into the bargain

NSFT staff were encouraged to make 2017 the year they made a difference to their own health by starting to get fit as our Trust registered with the national Active Lunch Challenge.

Lorraine said: “After giving up smoking last year and over indulging at Christmas, I was extremely unfit and the weight piled on.

“So, with my eldest daughter getting married and my youngest son embarrassed at the school gates, I decided to take the challenge. I began with a 10 minute walk at lunch time.

“Where I had the most fun, was dancing with my colleagues during our lunch break. The whole experience has really increased my confidence and everyone has noticed my weight loss.”

Lorraine lost over one and half stone by doing small bites of exercise and cutting out sugar from her diet and has now gone on to enrol on the Great East Swim a Mile at Alton Waters.
I really enjoy the challenge which being an active Governor brings. During my career, I worked clinically as an occupational therapist in mental health services, and then moved to the University of East Anglia to teach in the School of Health. Placing students in clinical services across the counties gave me a good understanding of mental health provision so, when I retired, I thought that becoming a Governor would be a fantastic opportunity to use my knowledge and experience.

“I enjoy trying to make a difference and asking questions within the organisation. It’s important to understand the issues within mental health services, and to be well informed about the impact that this has on service users and carers, as well as the staff who work within the Trust. I believe we should continually seek assurance that the organisation is doing the best it can within the constraints of the funding.”

“I enjoy trying to make a difference and asking questions within the organisation.”

“We are really pleased with some of the work we have done as a Council of Governors. For example, the Governors made a positive contribution to help the Trust come out of special measures through acting as a critical friend. We submitted a report to the Care Quality Commission (CQC) prior to their second visit explaining how we worked with the Trust to achieve improvement through establishing a specific sub-committee. This continues to raise issues and question activity to ensure that best possible practice is achieved.

“The principle roles of the Governors are to represent the interests of members and local people and to hold the Non-Executive Directors to account for the performance of the Board. Both of these are vital components to our task, and as Lead Governor I hope that I can support our Governors in working collectively to ensure the Trust provides the best possible care. It is a real privilege to have this opportunity and to use my experience with service users and mental health services to aim for best possible practice and to raise the profile of everyone involved with the Trust and its work.”

“AS LEAD GOVERNOR I HOPE THAT I CAN SUPPORT OUR GOVERNORS IN WORKING COLLECTIVELY TO ENSURE THE TRUST PROVIDES THE BEST POSSIBLE CARE.”

“Serving as a Governor is a real privilege”

Catherine Wells was appointed as our Trust’s Lead Governor this year following Guenever Pachent’s retirement from the post. She spoke to Insight about the sense of achievement which she has gained from being involved with the Trust since she was first elected as a Public Governor for Norfolk four years ago.

“Serving as a Governor is a real privilege” Catherine Wells was appointed as our Trust’s Lead Governor this year following Guenever Pachent’s retirement from the post. She spoke to Insight about the sense of achievement which she has gained from being involved with the Trust since she was first elected as a Public Governor for Norfolk four years ago.
Election results: New Governors join our Trust

Two new Governors were elected to our Trust earlier this year and have been playing a key role in representing the interests of local people in Norfolk and Suffolk to the Board of Directors.

The new faces – Leonard Wellings and Dr Richard Gorrod – were elected just after Christmas and took up their seats in February. Five of our existing Governors were re-elected at the same time, and are continuing to hold Non-Executives to account and act as a key link between the Trust and the communities it serves.

"GOVERNORS SHARE AN INTEREST IN MENTAL WELLBEING AND A DESIRE TO SEE NSFT DEVELOP AND THRIVE."

The Governors are all unpaid volunteers with an interest in mental health who are elected from within the Trust’s membership body and sit on a 29-strong Council of Governors. Robert Nesbitt, Trust Secretary, said: "Our Governors play a vital role at NSFT. They appoint our Non-Executive Directors, including the Chair, and approve the appointment of the Chief Executive."

"Governors come from all walks of life and share an interest in mental wellbeing and a desire to see NSFT develop and thrive.

All seven Governors will serve for three years.

NEW GOVERNORS (NORFOLK)

Leonard Wellings (Public Governor)

“I have many years’ experience working in the mental health voluntary sector, including assisting vulnerable adults who are in police custody and as a family carer for people suffering from anxiety, depression and learning disabilities.

“I am a good team worker and can understand things from many perspectives and perform the role of a critical friend, whenever needed.”

Dr Richard Gorrod (Service User Governor)

“I have been a doctor for 28 years and a GP in North Norfolk for over 20 years. For the last 10 years, I was the mental health lead at Fakenham Medical Practice.

“Last year, I became severely ill with mental illness and I spent some months in hospital. This had a profound effect on myself and my family. The experience has given me some insight and understanding into what matters when you are ill. I have since become a Trustee of Mind and been involved with teaching medical students at the UEA about mental illness.”

(Read more about Richard on Page 51)

RE-ELECTED PUBLIC GOVERNORS (NORFOLK)

Prof Ron French

“I’m experienced as a research physicist, IT director and in consultancy and, most recently, as a board member of a private university and now a trustee. I have also advised a range of government bodies and other agencies, including hospitals, on efficiency and the preparation and implementation of strategic plans.

“T was the carer of my mother and of my wife with terminal cancer, and had a bipolar son-in-law who refused help because of the stigma attached.

“As a Governor, I look forward to contributing to the council and its committees for the benefit of our local community.”

Shelia Preston

“As a Governor, I hope to act as an effective interface between service users, carers, the public, and the Trust in order to monitor the design and delivery of appropriate and superior mental health services equitably among users.”

RE-ELECTED PUBLIC GOVERNORS (SUFFOLK)

Dr Paddy Fielder

“I’m a retired family doctor, having worked in the NHS since 1970. I was employed at both the Norfolk and Norwich and Ipswich hospitals and spent many years in rural general practice in Suffolk. Besides caring for patients, I also taught medical students and graduate doctors.

“Since retiring, I started and have been involved in a patient participation group and chair the Debenham Project for the care of those with dementia within my community.”

Andrew Good

“My last management role before retirement in 2011 was as Chief Executive of Mid Suffolk District Council.

“A Samaritan volunteer for 19 years and Chairman of the Colchester, Tendring and Suffolk Borders branch, I’m concerned about the impact of mental health issues on people’s lives. I have first-hand family experience of seeking support for someone with Alzheimer’s.

“I believe that through effective engagement, service users can and should influence policy, service design and delivery.”

Kathleen Ben Rabha

“I am a Public Governor for Suffolk, having served before as a Partner Governor. I have strong connections with the community and voluntary sector. In my work in the Church of England in Suffolk, I’m raising awareness in church communities and faith groups about mental health. I am also connected with Healthwatch Suffolk and the Suffolk User Forum.”

BECOME A MEMBER OF OUR TRUST

The membership of our Trust is drawn from people living in the communities we serve and includes service users, carers, staff and members of the public. Our members bring commitment and enthusiasm for improving mental wellbeing in their local communities. There are various ways in which you can become a member. Log on to www.nsft.nhs.uk/member and:

• Complete our online membership form
• Download, print and complete our printable membership form and send it by freepost (details on form)
• Complete our downloadable form, save and send it as an attachment to membership@nsft.nhs.uk
• Call our membership office on 01603 421468
MEET OUR EXISTING GOVERNORS

PUBLIC GOVERNORS (NORFOLK)

Hilary Hanbury
“Twenty-five years in the education sector as tutor, educational adviser and in senior management gave me a gift: to be involved in the lives of people who were experiencing mental ill health. Much has improved in that time, but we can still do better. My pledge is to contribute to the continuing improvement of mental health services for the people of Norfolk and Suffolk.”

Stephen Fletcher
“As a Governor and service user in recovery, I pride myself on being the voice of service users and a passionate link between them, carers and the Trust. I am interested in the quality of life and services available to people living in the community and am keen to see service users placed at the heart of everything the Trust does. I take an active role in monitoring the safety, effectiveness and environment from which services are delivered with a view to improving mental healthcare for everyone.”

Nigel Boldero
“I’ve lived in Norfolk for around 30 years and have been a volunteer in a variety of fields, most recently providing independent support to public, charitable and voluntary organisations on a range of topics, including social enterprise development.

“I am committed to effective joint working between agencies and played a part in transforming outstretched facilities for older people and those with learning disabilities into less institutional, community-based care.”

Catherine Wells
“I became a Governor following my retirement as I see the role as vital in maintaining focus on the issues which matter to the public, namely high quality, effective and safe care. My personal, clinical and educational background gives me a good understanding of what is required to achieve this ideal for service users, carers and staff members.

“It is a vital time for our mental health service and my aim is to ensure the Trust provides the best possible care.”

CARER GOVERNOR (NORFOLK)

Mary Rose Roe
“I have both personal and professional experience of mental ill health, as a family member has accessed services since 2001 and I spent my career in mental health social work and counselling.

“The Trust is going through difficult and challenging times, but is committed to developing cultural change while recognising carers as experts by experience. I am committed to continuing to voice carer concerns while helping drive through this culture change.”

SERVICE USER GOVERNOR (NORFOLK)

Ginnie Benedettini
“I have always felt passionately about society working to improve mental health services and enhance emotional wellbeing.

“I have extensive experience of working with people with mental health conditions and a lot of insight into the way peoples’ lives are affected.

“This, together with my own experience of services, prompted me to stand for election as I feel that service users should have a voice, while the way in which services affect them needs to be improved.”

PUBLIC GOVERNORS (SUFFOLK)

Guenever Pachent
“I was elected to the Council of Governors when I retired as a service director in Adult and Community Services at Suffolk County Council. Professionally, I’ve developed services for people with mental health issues and learning disabilities, while personally I have been a family carer.”

Jane Millar
“I worked as a mental health services manager in Oxfordshire, and more recently in Suffolk, as a counsellor and a group facilitator with people experiencing depression, anxiety and low self-esteem, as well as with parents. I’ve worked in several voluntary capacities to support families with children.”

Martin Wright
“I have extensive experience of managing finances in a variety of different organisations. I have also worked with many community organisations and help with fundraising for Suffolk Cruise Bereavement Care.

“I stood for election after three close family members used mental health services with mixed experiences and outcomes. I feel the Trust needs individuals with good judgement, appropriate skills and experience to improve the quality of services it provides and its financial management.

“My aim is to work with others to hold NSFT to account, improve services and provide a strong voice for everyone who needs support with their mental health.”

CARER GOVERNOR (SUFFOLK)

Anne Humphrys
“As the mother of a teenager with complex mental health needs, I have been working with NSFT, Suffolk County Council, CCGs and other stakeholders to improve services for young people. During this time, I co-founded a support group for parents and carers and have also worked with national organisations to make a difference to the services they receive. This work has been informed by both my personal experiences as a carer and my professional life as a teacher.

“I am passionate about improving mental health services for all ages.”

JOIN US AT OUR NEXT MEETING

The Council of Governors meets in public six times a year and everyone is welcome to attend. The next two meetings will take place on Thursday, July 6, at the King’s Centre, in Norwich, and on Thursday, November 7, in Ipswich, venue to be confirmed closer to the time.

For more information or to contact the Governors, please email governors@nsft.nhs.uk

You can also find out more by visiting www.nsft.nhs.uk/governors

www.nsft.nhs.uk/governors
Governors shine the spotlight on complex needs

Carers, service users, the public and health and social care professionals were given an informative insight into the complex needs of people who have mental health problems and use substances during a special event organised by NSFT’s Governors.

More than 200 people attended the half-day conference, called “Mental Health, Drugs, Alcohol... Complex needs. Effective responses?”, which took place at The King’s Centre, in Norwich, in March. Organised following the success of similar events in Norwich and Ipswich last year, which helped to put ‘Dementia in Perspective’, it brought together a wide range of information while providing valuable insight into the support which is available.

Speakers at the conference included a service user and carer with lived experience of mental illness and substance misuse, who helped illustrate the complexity of the subject as well as the positive outcomes which can be achieved when services work together. Speakers at the conference included a service user and carer with lived experience of mental illness and substance misuse, who helped illustrate the complexity of the subject as well as the positive outcomes which can be achieved when services work together. Speakers at the conference included a service user and carer with lived experience of mental illness and substance misuse, who helped illustrate the complexity of the subject as well as the positive outcomes which can be achieved when services work together.

NSFT’s Council of Governors will be hosting its next event in the autumn in Suffolk. For more information, email governors@nsft.nhs.uk or visit www.nsft.uk/governors.

The final presentation was given by Luke Woodley, British Army veteran, founder of the Walnut Tree Project and co-founder of NSFT’s services aimed at supporting veterans.

“Helping people who have mental health problems and use substances is one of the most challenging social issues we face today,” said Nigel Boldero, a Norfolk Public Governor, who was involved in planning the conference.

“The aim of the event was to look at the problem from personal and professional perspectives and explore how we can work together more effectively.

“The event really helped to open up the discussion which was great to see and we hope it will encourage the wider health community to join up its thinking and action to improve outcomes for those who have complex needs and the support for those caring for them.”


dr ‘Ajith’ Nanayakkara De Silva

“I have spent more than 10 years as a mental health clinician with the Trust. I am confident I can bring my experience and expertise to the council to better serve our service users. I am passionate about taking staff members’ views, wishes and concerns to the management in order to make our services more effective, efficient, and both service user and staff friendly.”

Howard Tidman

“I’ve worked for NSFT in a number of areas and roles and have an interest in carer support and am the local care’s lead. This gives me a broad understanding of the priorities of staff, service users and carers, which I will represent rigorously on the council.

“I am passionate about the Trust providing high quality care and recognition that well-supported staff are essential in achieving this.”

Marcus Hayward

“I want to make a positive difference for those receiving our services and the staff delivering them. During our current period of introspection and improvement, I believe we should be appreciating great staff, identifying examples of best practice and advocating for transformation from the ground up. In my view, no one knows better how to improve services than those delivering them on the frontline.

“My aim is to hold the Trust’s senior leadership to account to ensure we really do all work positively and respectfully together to improve mental healthcare.”

Dr Zeyar Win

“My aim is to ensure the Trust provides compassionate, high quality and safe care as well as services which are designed and delivered with effectiveness and efficiency.

“I believe in person-centred care which is based on patient experience and participation, and truly believe that value-based healthcare can be achieved if everyone’s values are aligned. I pride myself on my transparency, honesty and trustworthiness, and hope to engage with staff and use collective leadership as a platform to provide the best care to patients, carers and professionals.”

A further six members are appointed from partner organisations. They are:

Norfolk

• Sian Coker – University of East Anglia
• Cllr Sue Whitaker – Norfolk County Council
• Katie Davis – NSFT Youth Council

Suffolk

• Heather Passmore – University of Suffolk
• Cllr Tony Goldan – Suffolk County Council
• Elise Page - NSFT Youth Council

Malcolm Blowers

“I have been a partnership Governor linking Suffolk User Forum to NSFT for several years, and believe I have a good understanding of the way the Trust works. I have also suffered with bipolar disorder since 1968 so have a strong knowledge of mental health conditions.

“Over the past few years, I have set up a group in Great Yarmouth and Lowestoft called Feedback, which gives service users the chance to make their voices heard. I also run a support group in Lowestoft twice-a-week.”

Paul Gaffney

“I have been a service user for over 14 years. I see the Governor position as enabling me to represent service users like myself on the Council of Governors. Too little representation of the needs of service users at all levels has often been a reason for the poor treatment of service users and their discrimination.”

“I have volunteered with a number of mental health and human rights charities which has helped me develop skills I use in this role.”

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In addition, NSFT link worker Phil Cooper gave some context around the concept of complex needs and the impact which different types of substance can have on mental health. Dr Augustine Pereira, Public Health Training Programme Director with Health Education England, looked at current research before Chris Brett, an NSFT Liaison and Diversion practitioner explored ways to manage complex needs effectively and how to access services. Derek Player, General Manager at St Martin’s Housing, also spoke about the impact of homelessness on mental wellbeing, while Dr Heidi Gure-Klinke, lead GP at City Reach health services, talked about the challenges of sharing care between different services.

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Enjoy the fun of the fete when summer comes to Hellesdon Hospital with games, activities, live music, food stalls, and children’s area.

Join us for some old fashioned fun and lots of amazing prizes. As well as helping to reduce the stigma around mental health you can also find out about working or volunteering with NSFT.

All profits go towards the NSFT’s Charitable Fund, raising money for a multi-use games area on the Hellesdon Hospital site.

Free entry from 11am to 4pm

See you there!

Hellesdon Hospital, Drayton High Road, Norwich NR6 5BE

All the fun of the fete when summer comes to Hellesdon Hospital

This summer our Trust will invite local people to a day of family fun and awareness raising when it holds its summer fete at Hellesdon Hospital, near Norwich.

Alongside information about mental health conditions and support that is on offer locally, there will be all the offerings of a traditional summer fete when the event takes place on Saturday, 22 July.

The public, service users and carers, and staff are all being invited to enjoy a day of fun, games and activities with live music, food stalls, and a children’s area.

NSFT’s Deputy Director of Nursing, Dawn Collins said she wanted people to see it as a great day out, as well as an opportunity to find out a few things that could help them or their loved ones in the future.

“I’m also extremely keen to open people’s eyes up to the opportunities of working within mental health, so there will be information about apprenticeships and jobs opportunities and even volunteering with NSFT.”

The event is being run by Trust staff, who are volunteering their own time to organise the day, and it is being generously supported by local businesses.

One of the Trust’s Quality Matrons, Heidi McKay, explained it was also about staff being able to show their friends and families a little bit about what they do.

“Some people still shy away from finding out about or talking about mental health and wellbeing, and we really hope that this event will help to lift some of that stigma.

“We WE WANT TO ‘OPEN OUR DOORS’ TO THE LOCAL COMMUNITY AND SHOW PEOPLE SOME OF THE WORK WE DO.”

“We as staff are very proud of what we do, and I don’t know of any colleagues who don’t do their very best every day to offer the best care and services we can. The day is about our being able to share that too, while having some old fashioned fun.”

It’s free entry to the event, which runs from 11am to 4pm, and any profits will go towards the NSFT’s Charitable Fund, raising money for a multiuse games area on the hospital site.

Staff and service users will be able to use the facility for sports such as basketball, tennis and netball.
\textbf{Sing Your Heart Out and protect your mental health}

A volunteer who helps run an innovative project which encourages people to boost their mental health and wellbeing through song has spoken of the huge impact which music has had on her life and urged others to consider following her lead.

Penny Holden, who has bipolar disorder, first attended Sing Your Heart Out (SYHO) in Norwich with her mental health support worker around 12 years ago. She enjoyed the session so much that she ended up becoming heavily involved in running the group. Since then, an additional three groups have been set up in Attleborough, King’s Lynn and Great Yarmouth, with a potential fifth session being trialed in North Norfolk. Originally launched with the support of NSFT, SHYO is open to mental health service users, carers, families, support workers or any adults who just enjoy singing. Around 100 people of all abilities attend the groups each week, and join in with a wide variety of songs which have been specially arranged by a musical director so that everyone can take part. The award-winning workshops are led by professional voice-coaches and are free to attend, although donations are welcome. The groups have proved such a success that Penny and fellow committee member Maggie Wheeler visited the University of Tokyo last autumn to explain more to students and academics and run a singing workshop for Japanese service users and their families.

“I was in a very bad place when my support worker took me to my first SYHO session,” said Penny. “But it has had a huge impact on me and I’ve come from somebody who could hardly hold their head up to someone who talks to academics in Japan. “SYHO has gone from strength to strength. I sang at school but my voice has never been great because I have a neurological condition. With SYHO that doesn’t matter – it’s about inclusivity, wellbeing, mental health, feeling good about yourself, gaining confidence and getting people back into living their lives.”

A research project which looked in detail at SYHO confirmed the advantages of singing, and highlighted inclusivity and the social aspects as key. Penny and Maggie’s invitation to Tokyo came as a result of this research, and gave them the opportunity to share its findings with the students and academics.

“I absolutely jumped at the chance to go – it was wonderful,” added Penny. “We gave a presentation on mental healthcare in the UK and the way treatment has changed, and also looked at Tom’s research.”

SYHO has been holding taster sessions in North Norfolk over the past few months, with the aim of setting up a permanent group by September 2017.

Organisers are now hoping that local people will volunteer to sit on the steering group and help with fundraising and organising sessions.

The updated Spirituality Strategy has been designed to:

- Ensure that service users and carers have an opportunity to discuss their spiritual needs as part of assessment and care planning
- Support the spiritual needs of Trust staff
- Work with faith communities to strengthen their capacity to support people with mental health problems

Chaplaincy staff are now working with service users to understand their spiritual needs so that appropriate services can be provided. Special spirituality workshops are also continuing at the Trust’s Recovery College, while staff are receiving training on how to speak to service users about spirituality while making sure their needs are met.

Bespoke training will also be organised for faith communities, as well as a special conference to help raise awareness of mental health issues.

Kate Holmes, Chaplain and Spiritual and Pastoral Care Lead with NSFT, said: “This updated strategy carries the message that spirituality is a broad concept which is inclusive and accessible to all, and in which equality comes first.

“It encourages staff to listen to what service users say matters to them while also respecting the faith beliefs of everyone at the Trust, whether they are a patient, carer or colleague.

“In addition, it also shows how we will work with faith communities to improve understanding of mental illness and reduce stigma and build their capacity to help.”

The strategy was launched late last year at an interfaith conference, called Breaking Down Barriers, which was organised by NSFT, East of England Faiths Agency and Healthwatch Suffolk at Quay Place, in Ipswich.

\textbf{MEETING SERVICE USERS’ SPIRITUAL NEEDS}

Our Trust has launched a new strategy which aims to make sure the spiritual needs of our service users are met while also helping faith communities to better support people with mental health problems.

\textbf{THE GROUP FocusES ON STAYING WELL AND MAINTAINING YOUR MENTAL WELLBEING.}

“There is something special about singing with SYHO,” said Julia Rumsby, Chair of the Norwich SYHO group and the SYHO Joint Working Group. “There is a very special atmosphere which is friendly, informal and accepting.

“The group focuses on staying well and maintaining your mental wellbeing, and it has a really positive impact on people – even those who are having a bad day when they arrive are smiling by the end of the session.

“We are now looking for volunteers to join the steering group to help run the North Norfolk group on a permanent basis by fundraising and organising venues, for example. We would love to hear from anyone who enjoys singing with others and would like to be part of creating something special so we can tell them more about how they could help.”

People can drop in to a SYHO session as little or as often as they like. For more information, contact details and a full list of meeting dates and venues, visit www.syh.org

To watch a video which NSFT has recorded of SYHO in action, visit www.youtube.com/watch?v=Up81j9eN6w&feature=player_embedded

\textbf{WE WILL WORK WITH FAITH COMMUNITIES TO IMPROVE UNDERSTANDING OF MENTAL ILLNESS.}
NEW SERVICE HELPS PEOPLE WITH DEMENTIA LIVE WELL FOR LONGER

People with dementia are now able to access information and support in the community to help them live well with the condition from its early stages until the end of life following the launch of a new specialist service in Suffolk.

Dementia Together has been developed with patients, carers and stakeholders and aims to work across organisational boundaries so that people can access joined-up support which better meets their needs and allows them to live independently for longer.

It is open to people at all stages of the illness and their families or carers, from those who are worried about memory loss and need advice to people with a long-standing diagnosis who are nearing the end of their lives.

The service was launched on 1 April and is being delivered by the Sue Ryder charity, in partnership with Norfolk and Suffolk Dementia Alliance, the University of Suffolk and Purple Tuesday, which will be developing a dedicated user-friendly website.

It has been commissioned by NHS Ipswich and East Suffolk and NHS West Suffolk Clinical Commissioning Groups (CCGs), in partnership with Suffolk County Council, and covers the whole of Suffolk with the exception of the Waveney area.

Dementia Together is available through a single free phone number, which aims to make it easier for people to get the right help at the right time and prevent them from reaching crisis point. This could include information, help from a trained advisor, a community-based support group, or chat with an expert, depending on the individual service user’s needs.

The new service will also work to raise people’s awareness of the signs of dementia so that as many people as possible ask for help and support.

To contact the service, call freephone 08081 688000 or email dementiathelpline.suffolk@suyrder.org

Norfolk and Suffolk NHS FT (NSFT)

Service user

Norfolk and Suffolk NHS FT (NSFT)

Service user

Service user

Family of service user

Community Memory services

“Thanks in particular for maintaining regular personal contact with her throughout this difficult time. This continued help stabilised her more rapidly during this difficult time. This continuity of contact with her throughout her mother to the memory clinic took time for her to respond to questions.”

Family of service user

Community Memory services

NEWS

SERVICE USER AND CARER FORUMS

DIARY HIGHLIGHT:

These monthly forums keep NSFT service users and carers informed about local issues and provide the opportunity to comment on service developments and get involved.

GT YARMOUTH AND WAVENYE

Hope for Change Service User and Carer Forum
Second Tuesday of each month, 1pm - 3pm
Poppies Lounge, Carlton Court, Lowestoft, NR33 8AG

Waveney Learning Disability Service User and Carer Forum
Second Tuesday of each month, 3pm - 5pm
Boston Lodge, Boston Road, Lowestoft, NR32 1UG

NORWICH

Secure Services Forum
First Thursday of each month, 11.30am - 1.30pm
The Norvic Clinic, Norwich, NR7 0HT

WEST NORFOLK

Moving Forward Service User and Carer Group
First Wednesday of each month, 5.30pm - 7pm
Chatterton House, Goodwins Road, Kings Lynn, PE30 5PD

SUFFOLK

Suffolk Learning Disability Service User and Carer Forum
Third Thursday of each month 2pm - 3.30pm
Red Gables, Resource Centre, Ipswich Road, Stonemarke, IP14 1BE

CARERS GROUPS

For those caring for people with mental health problems:
All welcome, Monday, 7pm - 9pm
Yarmouth Acute Services Centre

All welcome, Wednesday, 7pm - 9pm
CHR entrance, Harrier House, Hellesdon Hospital, Norwich

All welcome, Tuesday, 7pm - 9pm
The Poppies, Carlton Court, Lowestoft

For more information and contact details for the above groups, visit www.nsft.nhs.uk/SUandcarer

BOARD OF DIRECTORS

Check www.nsft.nhs.uk for timings

June 29, 2017

September 28, 2017

November 30, 2017

Endeavour House, 8 Russell Road, Ipswich, IP1 2BX

May 25, 2017

July 27, 2017

October 26, 2017

King’s Centre, King Street, Norwich, NR1 1PH

— NEWS —

Diary Dates

We have a busy schedule of events taking place across the county in the coming months which will give you the opportunity to improve your wellbeing, keep informed about Trust developments and provide you with the opportunity to get more involved by attending service user and carer forums and membership events.

— DIARY DATES —

Insight | Spring-Summer 2017
We offer high quality forensic secure services for people who have come into contact with the criminal justice system and may be experiencing mental health problems. We’re looking for staff nurses and assistant practitioners to join our teams at an exciting time when things are changing in our service, with some new ways of working and newly refurbished wards.

May 2017 sees the launch of the new blended female service, the first of its kind for low and medium security. We’re really excited to offer something new and this is your opportunity to get involved in this new innovative approach. If this sounds like something you’d like to be part of, we’d love to hear from you!

For more information please go to: nsft.uk/SecureServicesRecruitment
PATIENT ADVICE AND LIAISON SERVICE

NSFT PALS provide confidential advice, information and support, helping you to answer any questions you have about our services or about any mental health matters.

Email: PALS@nsft.nhs.uk
PALS Freephone: 0800 279 7257

Produced by Norfolk and Suffolk NHS Foundation Trust, May 2017.

If you would like this leaflet in large print, audio, Braille, alternative format or a different language, please contact PALS and we will do our best to help.