

C&I News

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Our focus on the future

Angela McNab
Chief Executive

Stacey Street residents get their fingers green



Maria is one of several Stacey Street residents experiencing the joys of gardening. To read more go to Page 7 

Since joining Camden and Islington NHS Foundation Trust earlier this year, my priority has been to build on our new Clinical Strategy and define in a really clear way what our focus should be longer-term.



For me, as Chief Executive of C&I, I wanted to find out what, long term, would bring the most benefit to the people we serve.

After much consultation, we believe there are three key aims on which we need to focus to deliver the best care possible to the greatest number of people.

These three priorities, reflected in our Clinical Strategy which is the theme of this edition of C&I News, are:

- Recovery through integration
- Prevention and early intervention and
- Research and innovation

Recovery through integration is about joining up care so that we give people the best chance of getting better. We know that currently lots of our services are in silos.

As people, we are not separated into boxes but have a range of issues in our lives that interact. We therefore need to have our physical health care, our mental health care and our social care integrated as one. That means people with mental health problems also getting information about debt, housing, and their physical health. Developing better integrated services is something we are working really hard to achieve.

Our Integrated Practice Unit for Psychosis is a fantastic example of this and is already showing great, early results. It works by shifting the focus to the needs of the patient, to care for both their mental and their physical health.

Our second priority is prevention and early intervention - the gap between rich and poor in Camden and Islington is very wide with people who are well-off getting lots of good advice about how to manage their health and, as a result, enjoying long and healthy lives. We need to provide that level of advice and service to everyone - regardless of their income or current state of health. Resources are limited, so we need to empower people to make the small changes - such as stopping smoking - that will make huge differences in the long term.

Last, but definitely not least, is our third priority - research and innovation. Our partnership with University College London has made us second only to Harvard in the world for mental health research. Currently, 25 of our staff are leading 45 research projects and we want to expand this further. Translating our research into better care has to be at the heart of everything we do. It is proven that high quality research staff raise the standard of care across the board and that is something I want to champion, as well as the opportunities this gives to our staff.

I would love to get your feedback on all of these plans and how you would like to see us take them forward in a way that really makes a difference - you can email your thoughts to communications@candi.nhs.uk

C&I research helps shape guidelines to reduce weight and heart disease in mentally ill

How world class research at C&I is helping inform one of the themes - Number Five - of our Clinical Strategy - "We will integrate with other services so that service users have their mental, physical and social needs met in a coherent way."

Research hosted at C&I into the risks of heart disease and diabetes among service users with schizophrenia and other forms of psychosis has influenced new national health management guidelines.

The work is part of an ongoing research programme, funded by the National Institute for Health Research, into the link between cardiovascular disease and mental illness, exploring the much lower life expectancy - as much as 20 years' - in those with mental illness. This is mainly due to poor physical health.

Led by David Osborn, Professor of Psychiatric Epidemiology at UCL, the PRIMROSE research at C&I was among evidence scrutinised by a team of nationally-recognised academics developing new recommendations by the British Association of Psychopharmacologists for managing physical health alongside mental illness.



The new recommendations give guidance on effective monitoring of physical health, such as blood pressure, obesity and blood glucose control; advice on changes in lifestyle to reduce weight gain; checks on smoking habits and alcohol consumption, and advice on potential switching of antipsychotic drugs or using different combinations.

Professor Osborn, who also works as a clinical consultant at C&I, said: "People with mental health problems very often have worse physical health, and this can be very frustrating for them.

"With the focus now moving to treating an individual's physical health needs alongside their mental health, these new recommendations are a welcome and valuable step forward in trying to close the mortality gap between people who have mental health issues and those who do not."

Useful links:

www.ucl.ac.uk/primrose

www.bap.org.uk/pdfs/BAP_Guidelines-Metabolic.pdf

The **ten** overarching themes and principles for C&I's clinical model are:

- 1 We will co-produce with our service users and carers their treatment and support
- 2 We will work in a recovery-orientated way
- 3 We will offer evidence-based interventions
- 4 We will choose outcomes that measure things that matter to service users and carers and use these to shape our services
- 5 We will integrate with other services so that service users have their mental, physical and social needs met in a coherent way
- 6 We will prevent mental illness deteriorating or relapsing in all our service users and we will contribute to initiatives that prevent mental health problems in children and young people
- 7 We will equip all our clinical staff to address drug and alcohol problems
- 8 We will improve access to our services for everyone regardless of gender, race, ethnicity, disability, sexual orientation and other protected characteristics
- 9 We will choose a quality improvement methodology and implement it
- 10 We will grow our already strong interest in research

In The Chair

C&I's Dr Vincent Kirchner explains our Clinical Strategy



Analysing the Clinical Strategy: Vincent (centre), with Katherine (left) and Shirley (right)

To answer some of their questions about C&I's new Clinical Strategy and related issues, service users Katherine Barrett and Shirley Scott-Norton met its architect, C&I Medical Director, Dr Vincent Kirchner.

Integration With Other Services to Support Mental, Physical and Social Needs

Q: How will the Integrated Practice Unit (IPU) develop and influence integration with mental health services and physical health care?

Vincent: The aim of the IPU for Psychosis is to address the needs of a group of people with similar conditions in a holistic way. It's not just about their mental health, it's about their physical health and their social needs, and about taking responsibility for all those things together. It's about having the specialists available for the person who has the needs. For instance, instead of someone with schizophrenia going to a hospital or a clinic for their physical health needs, such as diabetes or chest problems, they will be asked about progress in managing those issues at the mental health clinic when they are seen by the nurse or psychiatrist. They will then be helped if there is a problem.

Co-Production

Q: What will C&I do to ensure co-production of treatment and support in the Trust and the involvement of more service users?

Vincent: The Trust is thinking about how it liaises with and involves its service users. We need an approach that is straightforward and easy for staff and service users to understand.

We also need to clarify the role of the Service User Alliance – the representative body for service users and C&I divisions - and its remit, and how the decisions it makes are taken seriously.

Service user conferences are a good idea too, to have one or two a year where there are a wide range of topics, such as practical things you need to manage your life but also how you can be involved with the Trust.

We are also looking at whether our staff have the skills to engage with service users.

The game changer though is setting up a peer workforce where you employ people who have had experience of, or are experiencing, mental health issues on an equal footing with Trust staff. That brings something new to the whole dynamic between staff and service users.

Managing physical health alongside mental health needs

Providing a personal perspective on theme Number Five from C&I's new Clinical Strategy – "We will integrate with other services so that service users have their mental, physical and social needs met in a coherent way."

Katherine Barrett first had contact with C&I through our Recovery & Rehabilitation Division in 2011 and, now recovered, maintains close contact with the Trust as a service user representative on a number of panels. She has a keen interest in wider mental health issues and developments.

Katherine is particularly supportive of the overall focus in C&I's Clinical Strategy for treating an individual's physical health needs alongside their mental health requirements.

She has suffered respiratory problems for many years, with colds and a bad cough for four months each winter, and in the past ten years has battled weight gain, exacerbated, she believes, by her continuing medication. The concept of an Integrated Practice Unit, supporting a combined approach to physical and mental health is a positive development in her eyes, and she is excited at the launch of a new clinic at St Pancras to address

respiratory problems and heart disease.

Her difficulties in controlling her weight started in about 2006. She said: "Until then, I had been about nine stone but then suddenly ballooned out when I was prescribed a new drug. At that time, my GP put me on a special diet and I had access to a dietician who also took me out for a walk in Regent's Park once a week. It really helped and I lost about 10lbs in weight."

Katherine also supports the need for more research on the impact and side effects of medication, such as that carried out by the PRIMROSE research programme at C&I (see story page 1), and better explanation of this area for service users.

She said: "Information and advice on dieting and exercise is so essential for people on medication so that they can help keep their weight under control. They also need to be educated about food labelling, so that they are better informed and able to manage their wellbeing and eat more healthily if necessary."



Supportive: Katherine is behind the concept of an Integrated Practice Unit

Recovery-Orientated Treatment and Support

Q: Recovery is a complicated idea for mental health service users. How will you ensure that recovery is possible for a wide range of service users?

Vincent: In our Clinical Strategy there is a quote from the mental health group Rethink: "Recovery is not about getting back to how you were before, it's about building something new" - that's quite powerful and underlies what we are trying to do.

For each individual, recovery may mean something different and require different goals. Perhaps someone has a goal of joining a choir, then it's a question of whether they need to get into better physical shape, perhaps improving their breathing and addressing their mood, and then six months later seeing if they are able to achieve their goal.

Equality - Access to our Services for Everyone

Q: How will you actively develop equality in the Trust and improve the work done in the Trust around diversity?

Vincent: We have a diverse community and as a service are increasingly mindful of that.

We have started a black and ethnic minority (BME) staff network to enable any problems or issues to be raised. Senior managers are offering mentoring to the BME network, but it will work the other way round too, so that someone like me will be coached by a black staff member about what it's like to work in the organisation. Regarding service users, we need to connect with the hard-to-reach groups. It's about the Trust needing to go where people meet rather than them coming to the Trust for a meeting.

Research

Q: How will you ensure research is rolled out into the Trust's work and make sure that service users know about what research is going on in the Trust?

Vincent: We need to provide bite-size chunks of information, not extracts from complex scientific papers, so that everyone understands how our tremendous projects, led by our academics, jointly appointed with UCL, are moving things forward in our communities.

We are looking at embedding this in the organisation, starting with the induction of staff, communicating with them about our projects, and telling service users about projects they might want to participate in.

Development of our Acute Division

Q: Do you think it would be helpful for service users to have a pathway through the Acute Division?

Vincent: The Acute Division is not really for the long term, it's about treating a person in crisis and helping a person through that and then linking them back into their usual services.

There are different degrees of help too that people need, but you do not necessarily have to go through the whole pathway, just the bits that are right for your needs and it's not time-limited.

Development of our Services for Ageing and Mental Health

Q: How is the Services for Ageing and Mental Health (SAMH) division different to the rest of the Trust's service and what is your main aim in improving it?

Vincent: The fundamental difference is the service user group that SAMH looks after. There's no age cut-off, it's about people who have needs related to ageing. The approach is a bit like the Integrated Practice Unit (IPU) where you focus services around people with certain needs. This does something for the efficiency, quality and way that people think about things.

The SAMH services are not divided into psychosis and mood, the way they are in other Trust services. They have a community mental health team that looks after anybody with any condition.

Whilst this can present its own challenges, the SAMH did really well in the recent Care Quality Commission report. They were "good" across the board and some areas were "outstanding" - that was really positive.

We are always looking to improve our services. Our biggest challenge is dementia, and how we incorporate new findings from research into services.

Impact of the Clinical Strategy

Q: In what ways will the new Clinical Strategy change how staff work with service users?

Former addict Shirley helps others recover from the grip of drugs

Providing a personal perspective on theme Number Seven from C&I's new Clinical Strategy - "We will equip all our clinical staff to address drug and alcohol problems."

Much of Shirley Scott-Norton's adult life has been dominated by her addiction to hard drugs.

Her downward spiral started when she was a teenager, drinking when she was 14, and soon progressing to taking barbiturates and smoking cannabis, as she struggled to cope with intense emotional issues.

But by Shirley's own strikingly honest account, it was at the age of 22 when her mother died that her life went "pear-shaped" and she started using heroin.

Feeling unable to cope bringing up two small children, she took the heart-rending decision to hand them to social services, an event still highly emotional for her.

She said: "Social services told me my kids were clean and well-fed and the only way they would take them was if I abandoned them, so I pushed them in the door and ran off."

At the peak of her addiction, she was injecting heroin three or four times a day, contracting Hepatitis B from sharing needles, and had a first spell in prison for shoplifting.



Shirley: Helping others on the road to recovery

In the mid-80s she moved south from Lancashire to London to get clean, while sleeping rough in the West End. In the years that followed, Shirley suffered in two violent relationships, during which she brought up five more children.

With the trauma of that period, she strayed back to heroin use and was also smoking crack cocaine.

Shirley started on the long road to recovery about 15 years ago, receiving methadone treatment at the Margarete Centre, now part of C&I's Substance Misuse Service. With the help of the Trust, she has gradually been able to break her addiction and she has been out of treatment for two years.

So struck has Shirley been by the support from C&I, that she is now drawing on her own experiences to help other service users and is C&I's Margarete Centre Service User representative.

She said: "The service from the Margarete Centre has been absolutely outstanding for me. I now want to help other people get their lives back in order."

Vincent: If we can emphasise co-production and recovery as particular focuses, then I think that will really change the way staff operate. A lot of staff are doing this brilliantly but it's a matter of getting consistency so that all staff do this all the time. So for instance, ensuring that care planning becomes consistent.

Substance Misuse Service

Q: Where do you see the provision of Substance Misuse Services heading, given that voluntary organisations are taking over some of these services?

Vincent: We have won significant parts of the relevant contracts in Camden and Islington. That's important for our community, for our continuity of our services and for having proper pathways, for having expertise in the organisation and then for training staff. Who's going to train the future specialists in substance misuse if we don't have them as part of our organisation?

Jayne stresses the need for a sense of belief as part of recovery



A new beginning: A series of goals for Jayne

Providing a personal perspective on theme Number Two from C&I's new Clinical Strategy - "We will work in a recovery-orientated way."

For Jayne A one of the keys for a successful recovery from mental illness is developing a sense of belief in yourself, at the same time as receiving support from others.

Jayne, who is now out of treatment, is beginning to set herself a series of goals - very much in line with one of the focuses of C&I's Clinical Strategy, for a recovery-orientated approach.

This emphasises that care plans should be about the individual and not just their illness, providing support to improve the overall quality of life.

Jayne is keen to continue her studies and is exploring doing National Vocational Qualifications 2 and 3 in Health and Social Care, as well as looking at what C&I's Recovery College has to offer.

Jayne said: "One key for me is staying motivated and setting yourself a goal such as doing a course or adopting a new hobby. It also helps having a routine such as keeping the home clean or personal environment tidy, and keeping on top of arrangements for managing your accommodation and paying your bills.

"Keeping healthy through light exercise such as walking, as well as eating right can help a person's mental health and wellbeing."

"It's also important to enjoy yourself, seeing friends and taking part in social events such as going to the cinema.

"Participation is a great way for a person to manage their condition through having something to do."

Medicine for Members Expert talks: Mental Health in a Primary Care Setting

In June, a panel comprising primary mental healthcare and operational specialists participated in a Medicine for Members event discussing the management of mental health within a primary care environment.

The focus was on the innovative work being done by our teams of psychologists, psychiatrists, nurses and social workers, working alongside GPs in local practices.

Andy Stopher, C&I Deputy Chief Operating Officer, introduced the discussion, with Emily van de Pol, Interim Associate Divisional Director for Primary Mental Healthcare, explaining that placing teams within GP surgeries would make it much easier to get expert mental healthcare, closer to home and in a friendly and familiar environment.

Dr David Davies, an Islington GP and member of Islington Clinical Commissioning Group and one of the pioneer doctors to help get this project started, told how it had changed the way family doctors work and benefited their patients.

Medicine for Members events take place throughout the year on a range of mental health issues and areas of interest across C&I.

Anyone interested in becoming a member of Camden and Islington NHS Foundation Trust, please visit: www.candi.nhs.uk/members/, or email: membership@candi.nhs.uk.

In discussion: GP Alex Warner discusses the Integrated Practice Unit with C&I Communications Officer Danielle Critchley



Changing face of mental health in Camden

We caught up with GP, Dr Alex Warner, to discuss how the developing Integrated Practice Unit (IPU) will improve the way people receive treatment for both their mental and physical needs.

With the IPU already making its mark in Islington, we wanted to find out what we can expect to happen in Camden once the virtual group of services are fully established early next year.

The initiative – which will begin with improving the way people with psychosis are treated for all of their health needs – is believed to be the first of its kind in the country. It aims to produce better shared-learning amongst healthcare professionals, so service users will be able to discuss their mental and social care needs, medication and their physical health requirements including long-term conditions, all within the same environment.

Dr Warner, a GP partner at Caversham Group Practice and Clinical Mental Health Lead at Camden Clinical Commissioning Group, said: “The IPU will really be a game changer in the way healthcare is delivered. I’ll be able to speak to other healthcare professionals – like pharmacists – for their specialist help directly, rather than having to refer the service user on. This will ensure their treatment is far more streamlined than it is at the minute.

“New staff will be recruited who have specialities in both physical and mental health, and we will be looking at how we can use our current staff’s expertise and skills more effectively.”

With a practice that serves around 14,500 patients, Dr Warner believes that several hundred could benefit from the IPU service.

With patients in mind, Dr Warner told us: “Treatment will be tailored to meet the needs of the individual service user. This might be at their local practice, in an outpatient clinic, or in their own home – whatever will be most beneficial for them.”

Ensuring patients have been involved in the development of the IPU, a number of workshops have taken place to help identify what matters most. Service users, carers and healthcare professionals were in attendance, all helping to determine what the key priorities and outcomes should be. Dr Warner said: “Service user involvement has been a really powerful part of this, as it has helped us to shape the IPU to meet their needs.”

Psychiatrists, community psychiatric nurses and social workers have really backed the development of the IPU, as they collectively want to be able to do more for service users, and reduce the number of people who statistically die up to 20 years earlier because they have psychosis.

Concluding why the IPU is being implemented, Dr Warner was clear: “If your physical health is managed well, your mental health will improve, and vice versa.”

Art of Caring exhibition reveals the art of nursing

Artwork depicting the theme of “Resilience” is on display at St Pancras Hospital, with contributions from more than 30 exhibitors including nurses and service users.

More than a hundred visitors, including service users, staff and the general public, turned up for the opening of the “Art of Caring” exhibition on Thursday 21 July.

The multi-media exhibition - comprising artwork inspired by International Nurses Day - is a collaboration between Camden and Islington NHS Foundation Trust, Kingston University and The Arts Project charity.

More than 300 items were submitted in postcard format for the second year of the “Art of Caring” initiative which was organised by artist Alban Low.

Welcoming guests to the event, Caroline Harris-Birtles, C&I’s Deputy Director of Nursing, said: “At Camden and

Islington we are very keen to continue our strong support for art generally, but also specifically to use this event as inspiration to attract further creativity from our own staff and service users.”

Karen Norman, Visiting Professor at the Faculty of Health, Social Care and Education, Kingston University and St George’s, part of London University, said the exhibition provided a showcase for what nurses did, but also highlighted their additional, hidden talents and celebrated all that was good about the nursing profession.

The exhibition at St Pancras Conference Centre was curated by Peter Herbert of The Arts Project and runs until Thursday 13 October.



Welcome: Professor Karen Norman - Peter Herbert - Caroline Harris-Birtles



Enjoying the artwork: The Art of Caring exhibition

Spotlight: Wellbeing

Treating the whole person

Treating a person's physical health alongside their mental health is still regarded as innovative and not something that is done automatically.



Physical Liaison Team (l-r): Dr Maria Barnard, Consultant in Diabetes and Endocrinology at Whittington, Dr Munira Blacking, Specialty Trainee Psychiatrist and Andy Costa, Clinical Administrator, Elderly Wards



Dr Jules Summerfield

At Highgate Mental Health Centre, however, that is changing thanks to the introduction of Physical Health Liaison Clinics, led by C&I Consultant Psychiatrist, Dr Julian Summerfield, and

Whittington Hospital Consultant Physician, Dr Celia Bielawski.

Service users are seen at this weekly clinic by specialist doctors and treated for a range of physical health conditions, from chronic obstructive pulmonary disease to diabetes and heart disease.

Dr Summerfield explained: "These clinics have been running for 18 months and I think it's a brilliant and innovative idea. However, it's really exactly how things should work. Because of the nature of mental and physical health trusts being split, an artificial divide has developed between people working in mental health and doctors working in physical health.

"That's a major problem for many of our patients, who have severe mental health issues such as schizophrenia, alongside significant physical problems, leading to a massive reduction in life expectancy of between 15 and 20 years."

Typically, around 80% of mental health patients smoke, leading to respiratory problems. Weight can also be a common issue, either through leading a sedentary lifestyle as a result of their illness or as a side-effect of some medication, leading to other complications including diabetes.

Dr Summerfield said: "Previously, if patients were admitted to Highgate Mental Health Centre and needed physical health care, we would liaise with our colleagues at the Whittington Hospital and patients would then be transferred there for treatment. This was an inefficient process that was sometimes confusing for patients.

"There were many stages of that process where things could fail, meaning that sometimes people did not get the care that they needed in a timely manner. It could also be difficult for patients who were acutely distressed to have to travel to another hospital. The Physical Health Liaison Clinic avoids these problems and brings the necessary care to the patient where they need it."

How the clinic works

Four clinicians from the Whittington Hospital run the clinics - Dr Celia Bielawski, a Consultant in General Medicine and Old Age; Dr Myra Stern, a Respiratory Consultant; Dr Maria Barnard, a Diabetes and Endocrinology consultant and Dr Rodric Jenkin, a General Medicine and Ambulatory Care Consultant.

They are supported by Dr Munira Blacking, a Specialty Trainee Psychiatrist, who joined the Trust in 2013 and has been instrumental in setting up and running the clinic, along with Andy Costa, the Clinical Administrator for the Elderly Wards.

One of the Whittington physicians comes over every Wednesday afternoon to treat inpatients at the centre who have been referred by one of the ward doctors.

Dr Barnard said: We encourage the (Highgate) doctor to accompany their patient to the clinic to enable them to learn from the (Whittington) physician who is providing the treatment. This is a quite unique training opportunity for junior doctors."

Dr Blacking said: "One example of the work we do is around smoking. Many inpatients are smokers and whilst we know that some are keen to cut down on their smoking, many don't get the intensive support and medication they need, especially those smoking up to 60 cigarettes a day.

"Typically, we might encourage a high risk inpatient on the ward who smokes and who has symptoms, to come down and have a smoker's lung health check to see if they have chronic obstructive pulmonary disease which is a serious condition requiring a detailed care plan.

"Due to the high number of elderly inpatients at Highgate, the clinic sees many individuals with dementia, who can be treated for conditions such as Parkinson's Disease.

"The team from the Whittington are very keen teachers and highly experienced doctors who pick up physical conditions that we are just not able to see. Having someone there who you can ask for advice and who can pick things up early and augment the care we provide is extremely valuable. If we avoid people becoming physically unwell, it doesn't detract from their mental healthcare."

The other element at the clinic is an advice line that is manned 9 to 5 each day by one of the four physicians which means immediate access to a consultant for advice.

Service user feedback

Dan*, an inpatient, was referred to the clinic for treatment for his diabetes. He said: "I think it's a really good idea. I've been given advice today about my diet and also been prescribed medication. I think this sort of clinic should be available more widely elsewhere."

* not his real name

“**One example of the work we do is around smoking. Many inpatients are smokers and whilst we know that some are keen to cut down on their smoking, many don't get the intensive support and medication they need**”

– Dr Munira Blacking



60 Seconds with...

Zipporah Jempeji

Staff Engagement Manager

What do you like to do outside of work?

I really enjoy walking and spending lots of time outdoors. You can often find me visiting different parks and setting myself various walking challenges. I have recently just finished climbing one of the three peaks in the Yorkshire Dales, which was very enjoyable. Living in such a busy city like London, I think it is important to venture out of the capital once in a while. With a passion for photography, I often like to capture my walks on camera.

What has been your route into joining the Trust?

I've been working for the NHS for almost eight years. After university, I started my NHS career as an administrator at Great Ormond Street Hospital. During this time, I studied for my Masters in Occupational Psychology, and discovered my interest in HR, so I joined their team in 2011. I mainly worked in recruitment before moving into employee relations and completing projects on equality and diversity and health and wellbeing. In 2013, I saw a job at C&I being advertised - primarily to do with health and wellbeing - which I was successful in applying for and have really enjoyed. My role has changed over the last three years and I work in a range of projects within the Trust to improve staff experience.

Why is staff engagement important to the Trust?

It is important, as it can affect all aspects of the organisation. It can impact on how much effort staff put into their roles, how they feel about the work they do and the teams they work with. Research has shown staff who are more engaged with their roles and the Trust deliver better patient care. Ultimately, my role is to engage staff, get them feeling positive about what they do and resolve issues that come up around staff experience. We monitor the effectiveness of our staff engagement through the Annual Staff Survey and the Staff Friends and Family Test.

Congratulations on being an awards finalist for the Trust's Change and Inspire Health and Wellbeing programme. Can you tell us a bit more about it?

The programme is an umbrella of all the initiatives we run as a Trust to improve our staff's mental and physical health and wellbeing. This includes the mindfulness sessions, the newly formed netball team and yoga classes. C&I is funding the Change and Inspire Health and Wellbeing Programme, which shows its commitment to investing in staff welfare. Encouragingly, the programme was recognised nationally at the annual Healthcare People Management Association Awards for 2016, as we were a top three finalist in the Excellence in Employee Engagement category.

We hear you are a massive fan of action thriller films?

I like anything which is fast-paced and has lots of action. With the fifth film of the Bourne series out now, I will certainly be paying the cinema a visit!

Edgar ACTs to take control of the "passengers on the bus"

As part of a strategy to support his mental healthcare, Edgar Causey has found himself placed firmly in the driving seat.



In the driving seat: Edgar Causey

He is one of about 40 C&I service users to have participated in a form of cognitive behavioural therapy (CBT), a central feature of which is the metaphor of "Passengers on the Bus". This aspect involves getting individuals to learn to cope with various "passengers" - the feelings and thoughts that can influence, divert or hijack an individual from going in a positive direction.

Known as Acceptance and Commitment Therapy (ACT), the flexible model encourages an individual's openness and non-judgemental view of their thoughts, feelings, urges, voices and sensations.

Edgar, whose psychosis is marked by strong delusions, participated in a programme of six two-hour facilitated sessions run at the Peckwater Centre, Camden, by C&I's Recovery and Rehabilitation division earlier this year, and was particularly struck by the exercise.

Each participant takes it in turn to be the driver of the bus, with the other "passengers" acting as the thoughts, voices or feelings that are obstacles for the driver, while the group walks round the room.

The aim is to explore different, more helpful ways of responding and to view the sensations simply as experiences.

The one-time law student said: "My passengers were my real life voices, telling me I was gullible, that I was not grown-up, that there was no point in me getting out of bed in the morning. I found it stretched and stimulated my mind and helped show me how to be more aware and open to these feelings, and not to give into them."

The programme also includes adaptations of mindfulness and noticing exercises, and focusing on breathing.

The UK is recognised globally as at the cutting edge of CBT for psychosis development and C&I benefits from clinicians who have experience at the heart of the latest thinking.

Dr Joe Oliver, Consultant Clinical Psychologist and C&I Cognitive Behaviour Therapies Lead, said: "Our aim is to give service users the tools to live a fuller, richer life and to give them more choice as to how they approach the experiences that they are going through."

The ACT programme is being developed under Dr Natasha Avery, Clinical Psychologist and Lead for C&I's ACT for Recovery from Psychosis Group. A trainee clinical psychologist is currently evaluating data from the previous four programmes with a view to the research being published.

Further programmes are being planned for 2017.

Meet our latest Stars of the Month



Star: Elsie (centre) and her colleagues at Isledon Road Recovery Centre

Elsie Quarshie-Awuah, Administrator at Isledon Road Recovery Centre, Islington, has won a Star of the Month award after being nominated by two service users who cited her cheerfulness, positivity and respectfulness among her many impressive qualities.

Elsie has been the administrator at the day centre, which caters for a pool of about 160 service users, for four years, previously having worked in an administrative role at Highgate Mental Health Centre.

Making the award, Trust Chair, Leisha Fullick, said that Elsie's nominees admired her hard work and early starts, her dedication and the fact that she went out of her way to lift people's spirits if they were having a bad day.

Pam Hodge, a Community Psychiatric Nurse (CPN) with C&I for 15 years and most recently a CPN at Camden's Early Intervention Services (EIS), was nominated for a Star



Star: C&I Chair Leisha Fullick and Pam Hodge

Our Star of the Month award celebrates a member of staff or team who really put our values into action. Service users, carers and professionals can nominate a member of staff who has made a real difference to your life.

of the Month award by her manager, Rebecca Hardman.

She said "Pam is an extremely positive person, who, after all these years - despite very stressful and difficult circumstances - has remained wholly committed to the job and team."

Dona Smart, receptionist at Highgate Mental Health Centre, has also been presented with a Star of the Month award.

She was nominated by Ruth Crowley, a Clinical Specialist Occupational Therapist, who said: "As an ex-receptionist, I appreciate that a lot of work goes on behind the cheerful time and morning greeting. Dona always remains calm regardless of what is happening in the building."



Star: Dona Smart

Taking steps in dementia care

The Camden Memory Service has introduced improvements to the way it cares for people with dementia. The team now offers a comprehensive post-diagnostic service to all patients with dementia living in the community in Camden.

Previously, only patients who were assessed and prescribed medication received ongoing care. However, not all patients with dementia are suitable for anti-dementia medication. These patients were previously discharged from the service, which meant their condition was not monitored and they were at risk of not receiving support and care in a timely manner. This often resulted in these patients being re-referred back to the team or to the Community Mental Health Team at a later stage.

The new model, which is based around peoples' needs, means that patients will get more dedicated time with the right people. This means that:

- All patients, regardless of the type of dementia and whether they take anti-dementia medication, will now have ongoing access to post-diagnostic support and will be reviewed regularly.
- Patients are reviewed according to their care needs. This means they can be seen more often than once every six months if necessary.
- People with dementia and their families now



Dedicated: The Camden Memory Service Team

have one team they can contact should they need advice and support and can access specialist support should there be a change in behaviour or a deterioration in their condition.

- The team is growing to care for more patients with an additional three Band 4 Practitioners, an Assistant Psychologist and a Band 5 Nurse. The team's Occupational Therapist is now also available full time.
- The team will align itself with the Camden Clinical Commissioning Group, GP Federations and Frailty Hubs which means that each Federation (north, south and west) will have a named consultant and lead senior nurse.

Marijke Post, Team Manager, said: "The real benefits are that all patients now have regular access to specialist dementia support and that patients and their families know whom to contact. This decreases the potential risk of crises for those people we normally lose contact with as they have been discharged and it means that we can provide the right care and support at the right time.

"Our Clinical Strategy as a Trust is to create services that are more accessible, person-centred and responsive and this is what our service aims to do for people with dementia in Camden."

Kingston therapists aim to remove Korean stigma to mental health

Providing an illustration of theme Number Eight from C&I's new Clinical Strategy – "We will improve access to our services for everyone regardless of gender, race, ethnicity, disability, sexual orientation and other protected characteristics."

The Trust's psychological therapists and wellbeing specialists are developing their online therapy service for south west London's Korean community.

It is estimated that up to 20,000 people from a Korean background live in Greater London, particularly in and around Kingston, making it the most concentrated Korean population in Europe.

The number of Koreans accessing C&I's Kingston iCOPE psychological therapy services is very limited though and the team, under Clinical Lead Rhona Trotter, is now working to break down the strong stigma within the Korean community around mental health.



Winnie Yoon

An online interactive therapy programme, recently launched by C&I for Kingston, is now being translated into Korean and a trainee Psychological Wellbeing Practitioner, Korean-born Winnie Yoon, will work with the service for a year from this autumn to strengthen links with the community.

Winnie, who settled in the UK 18 years ago, said: "There is very little attempt by the Korean community to access therapy services in the area at the moment.

"They do not recognise low mood, depression or anxiety. Traditionally, if you complain about your mood you are seen as weak or as having a personality defect."



Sunyoung Lee

Korean-born Sunyoung Lee, who was appointed an Honorary Counsellor at Kingston iCope just over a year ago, added: "The online programme will be invaluable for the Korean community, helping educate them about what help is available and providing easier access."

The Korean version of the online therapy programme will mirror the English version, covering topics such as Panic, Depression, Work Stress and Relaxation.

If successful, the approach could also be used elsewhere in Kingston for other communities including the Polish and Sri Lankans – in line with one of the key themes of C&I's new Clinical Strategy which is to make services available to all communities.

Kingston's Korean population started to grow in the 1950s as a legacy of the UK's involvement in the Korean War, but has risen further due to the popularity with students of nearby London universities and the arrival of South Korean companies such as Samsung and Kia Motors.

Continued from page 1

Stacey Street residents develop their skills in the garden



Forefront of care: Pansy gets a helpful hand from Verity in growing mint

Stacey Street – C&I's only nursing care home – has been encouraging residents to get out in the garden to help increase their quality of life.

The home has demonstrated why occupational therapy should be at the forefront of care in nursing homes, thanks to this innovative pilot project designed to engage people who have dementia and long-term mental health problems.

The gardening group was structured around the principles of cognitive stimulation therapy, with all activities suited to each participant, providing challenges which were achievable and stimulating. There were group sessions for a period of five weeks, along with one-to-one meetings.

The first session began with the group singing together to feel relaxed. They then studied different herbs and passed them around the group, which helped to facilitate communication between members. The main activity was an exercise on how to grow mint, which allowed participants to be involved as much as they wanted to be. Members of the group then enjoyed some mint tea, before singing a garden-themed poem to close the first session.

Occupational Therapy student, Verity Jones, who developed and implemented the pilot said: "The group activities helped to facilitate cognitive and sensory stimulation. The residents who came along were very positive about the group and activities such as gardening and singing are brilliant for improving health and wellbeing."

Clinical Specialist Occupational Therapist, Marcus Yorke, who oversaw Verity's project said: "This pilot project demonstrated the benefits of providing meaningful activities that are carefully graded so that all group members can participate. By stimulating residents with dementia in a positive way, we have seen an increase in self-worth, communication and quality of life as well as a reduction in agitation, aggression and other behaviours that challenge.

Thanks must go to the manager and staff of Stacey Street who continue to support this collaborative and pioneering work."

The success of this pilot now means that further student projects at Stacey Street and other C&I sites are in the pipeline.



Marcus and Verity

Service users to be drawn closer to the heart of C&I

Providing an illustration of theme Number One from C&I's new Clinical Strategy – "We will co-produce with our service users and carers their treatment and support."

C&I is drawing up a wide-ranging plan giving service users greater opportunities and support to be more closely involved in the work of the Trust and in shaping our services.

The Service User Involvement Strategy - the result of nine months' of collaboration between service users and staff – aims to ensure a consistent approach to encourage and involve service users in the future. It is due to be launched later this autumn.

This co-production approach is in line with the "Five Year Forward View" from NHS England's Mental Health Taskforce last year, as well as one of the key principles of C&I's new Clinical Strategy.

The new strategy will have seven central strands:

- Improve access to information so service users are more in charge of their own care
- Ensure staff have the skills and information about local resources to support service users

in individual care planning, and recovery

- Ensure service users know how to get involved in the Trust planning and monitoring of services. Build stronger links with the Service User Alliance and the range of service user groups to ensure active co-creation
- Offer training to service users in their own right supported by staff to help develop new skills and access to new roles, alongside recruiting service users with experience of mental health on an equal basis to staff as part of a "peer" workforce
- Ensure service users are recognised, valued and rewarded for their work
- Ensure service users are informed about research activities within the Trust and have good information enabling them to participate (where appropriate) if they wish
- Ensure Trust staff and Board members know how to access the pool of service users and groups

Quote of the Quarter

Submitted by Jayne A



"To be happy as a whole, mental wellness plays a role"



(Source: thefreshquotes.com)

Upcoming Trust events

Next Medicine for Members event

Thursday 20 October: "Ensuring people with mental health can live with dignity", marking World Mental Health Month, Conference Hall, St Pancras Hospital, 6pm – 7.30pm

Dates for 2017 Medicine for Members events

Thursday 26 January
Thursday 30 March

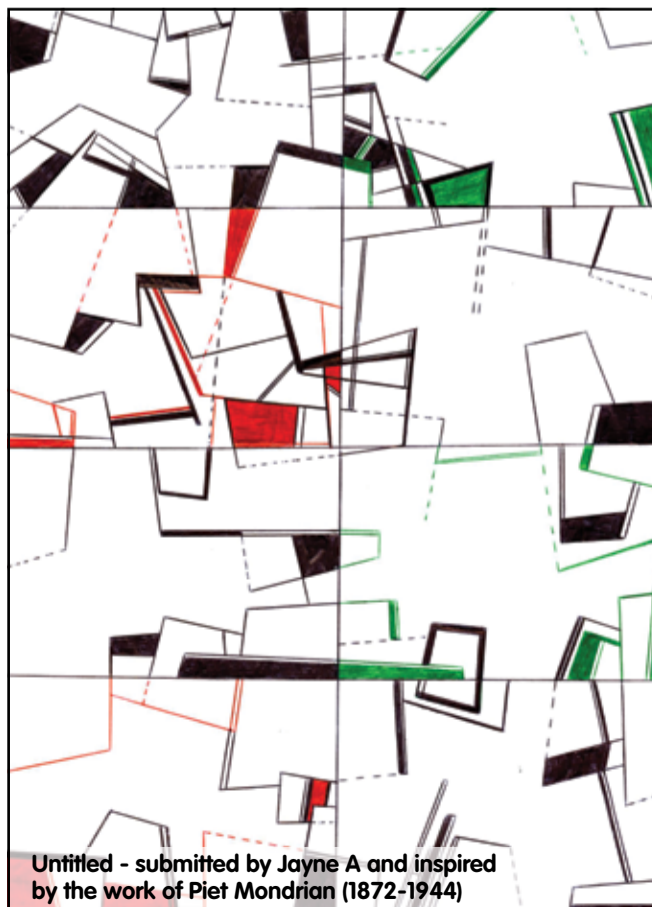
Annual Members' Meeting (AGM)

Thursday 6 October 2016: Keynote speaker, Professor Swaran Singh, Head of Mental Health and Wellbeing, Warwick University on "Latest Developments in Psychiatry", Conference Hall, St Pancras Hospital, 5.30 – 7.30 pm (Doors open 4.30pm)

C&I Choir

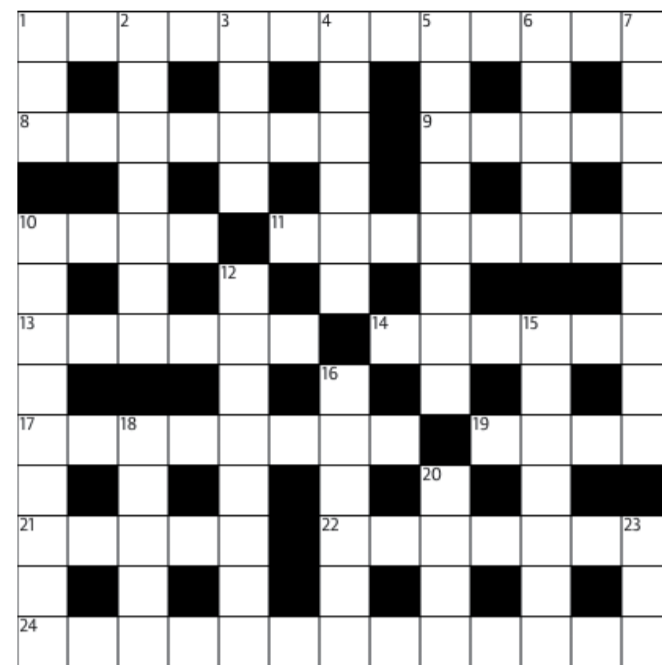
A Trust choir has recently been formed, initiated by the Council of Governors and which anyone can join by emailing peter@keychanges.org.uk. It meets every Tuesday at The Well, St Pancras Hospital, from 5.30pm to 7pm.

Service User Artwork



Untitled - submitted by Jayne A and inspired by the work of Piet Mondrian (1872-1944)

Take-a-break with our Crossword Puzzle



Across

- 1 Showing constant change (of colours?) (13)
8 Beer mug (7)
9 Contribution (5)
10 Cunning (4)
11 Armed service (3,5)
13 Snub (6)
14 Shake (with arrows?) (6)
17 Hair pluckers (8)
19 Nefarious (4)
21 Many times (5)
22 Given to telling gags (and having fun) (7)
24 TV preacher (13)

Down

- 1 Necessary equipment (3)
2 Wool fat (7)
3 Muslim leader (4)
4 Invest with ministerial authority (6)
5 Hairdresser (8)
6 Musician (5)
7 City's main church (9)
10 Garment partly visible under a jacket (9)
12 Soviet president, d. 1982 (8)
15 Venetian composer ("The Red Priest"), d. 1741 (7)
16 Hard worker (6)
18 Glorify — honour (5)
20 Spots (4)
23 Sewer rodent (3)

C&I News

Have you got a story?

If you have a story idea for C&I news or would like to give us feedback then please email communications@candi.nhs.uk

This autumn issue of C&I News was focused on our Clinical Strategy. Many thanks to our service users Jayne, Katherine and Shirley who greatly assisted in its editing.

Editors: Jon Salmon and Angela Boon
Tel: 020 3317 6291



If you are a C&I staff member or service user and would like to be a guest editor, sharing your ideas or views for our next edition, please email: communications@candi.nhs.uk

Crossword Answers:
Across 1: Kaleidoscopic; 8: Tankard; 9: Input; 10: Willy; 11: Airforce; 13: Ignore; 14: Quiver; 17: Tweezers; 19: Evil; 21: Often; 22: Jocular; 24: Televangelist
Down 1: Kit; 2: Lanolin; 3: Imman; 4: Ordain; 5: Coffeur; 6: Piper; 7: Cathedral; 10: Waistcoat; 12: Brezhnev; 15: Vivaldi; 16: Trojan; 18: Exfol; 20: Acne; 23: Rat