ACUTE DIVISION

CARER LEAFLET

CRISIS HOUSES
Introduction

What is a crisis?
In mental health, a ‘crisis’ refers to a time when an individual may need an additional and intensive period of support to manage their mental health needs.

Acute Division (Inpatient Wards, Crisis Houses, Crisis Teams, Acute Day Units and Liaison Services)

When a person is in a ‘crisis’ they may require services in Camden and Islington’s Acute Division. These include; Liaison Services at Emergency Departments, Inpatient Wards, Crisis Houses, Crisis Teams, and Acute Day Units. These services aim to provide assessment and treatment in the least restrictive setting, while taking into consideration the individual’s needs. The service user will be discharged back to their specialist community service or GP following an episode completion.
What is a Carer and what are Carer Rights?
The word ‘carer’ refers to a friend, relative or partner of a service user. A carer may provide practical or emotional support to the service user. They may or may not live with the service user.

As a carer, you have legal rights and entitlements. These rights include:
• The right to have your needs assessed in a Carer’s assessment, which looks at all your needs and determines whether you are eligible for services and additional support
• The possibility of receiving direct payments so that you can choose the most appropriate service to have, subject to eligibility
• Rights in the workplace

Confidentiality and information sharing during crisis episodes
The Acute Division recognises the importance of information sharing between service users, professionals and yourselves.

Service users must consent to information being shared with you. Sometimes, service users may decide to share different types of information. For example, they may choose to share information about their diagnosis and care plan with you but not more sensitive, personal information. It can be upsetting and worrying when service users decide to withhold information from you. The Acute Division aims to support you during these times.

Clinical teams will be ready to focus on aspects of care which specifically relate to you (e.g. overnight leave from hospital if you live with the service user). Clinical staff within the Acute Division have a duty of care to disclose any appropriate risk information with you following a risk assessment.

All acute division services welcome information provided by you. You can provide ‘third party information’ which is kept confidential and not disclosed to service users. Service users cannot prevent clinical staff from receiving information from carers.

Top tips for sharing information between you and staff:
• Share your views on your own needs as well as the services users
• Inform the clinical team of the areas of care you wish to be involved in
• Always state if you want anything you say to be kept confidential
• If you wish to discuss issues with senior staff, please ask for this.
  Appointments with senior staff may need to be booked in advance. Any written information provided by the carer in advance of discussion is welcome
What can I do to support the service user?
It can be difficult to know how best to support an individual during times of crisis, especially if you see the individual experiencing acute distress, self-harm, extreme changes in behaviour or suicidal thoughts.

Here are some key things to keep in mind during this time:
• Mental health charities can provide information on how best to support individuals, as there is a ‘no size fits all’ rule
• It might be useful to note the helpful and not so helpful approaches you have already tried in supporting the individual
• Sometimes, it is valuable to understand the individual’s diagnosis and how mental health problems affects them
• Keep a note of medication, changes to treatment and any questions you may have for the professionals
• Sometimes keeping a diary of all appointments and meetings can be helpful
• When possible, encourage the individual to continue to do shared daily activities with you

What should I do to support myself?
Crisis episodes can be a very difficult period for carers. Sometimes the crisis episode has been building and carers can already be exhausted by the time services intervene. Carers can then be faced with a variety of emotions during these times such as worry, relief, guilt and sadness.

During these times it is essential that you look after your own health and wellbeing. Often carers report that their main priority is the service user and their own needs can be neglected.

Here are some key things to keep in mind during this time:
• Try to eat regularly and exercise when you have the opportunity
• Monitor your sleep and ensure you have enough rest
• Try to give some time to yourself to do things you enjoy
• Balance your daily activities and cut down on non-essential tasks
• Seek support from friends, family or join a local support group
• If you begin to feel low, you can speak to your GP. Talking therapies are also available via your GP
• Do not put too much pressure on yourself
Crisis Houses offer 24-hour intensive support in a residential setting to service users who are in crisis. The Crisis Houses serve as an alternative to hospital admission and aim to offer support and treatment to resolve current crises. Crisis House admission is short-term and the maximum stay is two weeks.

There are two mixed-gender Crisis Houses for adults (aged 18 +) across Camden and Islington Foundation Trust.

### Other Crisis Houses within Camden and Islington

**Drayton Park Women’s Crisis House** provides residential stay to 12 women and ongoing non-residential services to women who have previously stayed (e.g. workshops). Children can also be admitted with their mothers. This service follows a different therapeutic model and will therefore not be discussed in this leaflet. For more information please contact the house on **020 7607 2777**.

Within Camden and Islington there are also a number of voluntary services offering Crisis House support.

The **Maytree Respite Centre** provides residential support to acutely suicidal individuals (**020 7263 7070**).

**Highbury Grove Crisis House** provides residential support to acutely distressed individuals in Islington (**020 7288 1051**).
Going into a Crisis House

Individuals can self-refer to The Rivers or Daleham House or can be referred by their community team, GP or via the Crisis Team. Self-referral is encouraged to provide a sense of control and management of the crisis episode. Sometimes, a service user may be referred to a Crisis House as a ‘step down’ from an inpatient ward (i.e. the individual is ready to leave the acute inpatient ward but continues to require a level of support).

If you have a concern about a family member or friend, and feel they may benefit from a Crisis House admission please speak to them or discuss this further with a professional involved in the care.

Referrals are accepted between 9am and 5pm each day. There is sometimes a waiting list for Crisis House admission.

Initial Assessment
If the referral is appropriate, service users will be offered an assessment for their suitability to stay at a Crisis House. On occasions, the team may feel the Crisis House is not the most appropriate service at that time (e.g. if the service user requires hospitalisation or perhaps has had a very recent Crisis House admission.

What happens if I think the service user needs an inpatient admission?

It is important that you discuss your concerns with staff. The Crisis House Team assess service users regularly and on occasion, a service user may be transferred to an inpatient ward from the Crisis House.

What should I take into the Crisis House for the service user?

Sometimes a service user has little time to think about what to take into a Crisis House. You could offer to bring in some useful items such as:

- Extra clothes
- Night clothes/Toiletries
- Enjoyable activities (e.g. books/music
- Mobile phone

For risk and safety reasons service users are not allowed alcohol or drugs or dangerous objects. Recording equipment is not permitted due to patient confidentiality. Any medication that is not prescribed by the Crisis House Team should be handed to staff to dispense appropriately.
Who are the professional team in the Crisis House?

Each Crisis House is made up of a ‘multi-disciplinary team’ (MDT) consisting of a variety of professionals. These include:

**Psychiatrists**
Psychiatrists are medical doctors who have undergone additional training to specialise in the treatment of mental health problems. Doctors provide input into each Crisis House and regularly review the care plan and medication. Not all service users will need to meet with a doctor during their time in the Crisis House.

**Mental Health Nurses**
Trained mental health nurses work in the Crisis Houses. Nursing staff are responsible for care planning, risk assessments and supplying treatment.

**Health Care Practitioners (HCPs), Graduate Mental Health Workers and Student Nurses**
The delivery of care is offered in the main by a support team of additional workers and professionals in training who also supervised by registered professionals.

**Crisis House Manager**
The Crisis House Manager is the most senior member of staff in charge of running Crisis House. The Crisis House manager works 9am-5pm.

**Psychologists**
Each Crisis House has a psychologist working for approximately half a day per week. Psychologists have specialised training in talking therapies. Referral to psychology is led by clinical priority determined by the multi-disciplinary team.
Who interventions will the service user receive whilst they are in the Crisis House?

Interventions are based on the recovery model and aim to help individuals build their skills, confidence and self-esteem.

All service users who attend the Crisis House will have a care plan. This outlines the planned treatment an individual will receive whilst in the Crisis House.

It is important for the clinical team to get input from service users and carers about what they would like included in the care plan. Please feel free to put forward any suggestions to the care plan. All service users should have a copy of their own care plan.

Some of the interventions available in the Crisis House are:

**Access to Acute Day Units:**
If appropriate, service users will have access to The North and South Camden Acute Day Units. These Units provide a weekly therapeutic group programme such as music therapy, yoga, pottery and dance and movement therapy. For more information please ask for the weekly timetable of events.

**Psychological interventions:**
A range of psychological interventions are delivered to promote well-being and facilitate recovery. Psychological input is short-term and service users may be signposted towards other services or referred to additional counselling agencies within the community.

**One-to-ones:**
Crisis Houses offer regular one-to-one talking times for service users. This allows space to reflect on current circumstances and make sense of present difficulties.

**Medication:**
Medication is usually part of a service user’s care plan. The medication may be administered at different times during the day dependent on an individual’s needs.

**Smoking cessation support:**
Camden and Islington is a no smoking Foundation Trust. Smoking is not permitted anywhere on site. Smoking cessation support is offered.
What are reviews and should I attend?

Reviews are held regularly between staff, the service user and if appropriate, community professionals (e.g. the patient’s care co-ordinator). Each review aims to develop care plans and to move service users towards discharge.

You are welcome and encouraged to attend these reviews if the service user agrees. If the review times are unclear or if you need to attend at a specific time during the week please telephone the Crisis House. You can also request to speak to staff on a 1-1 basis if necessary.

Practical information about the Crisis House

When are meal times?

- Breakfast 08.15 - 08.45
- Lunch 12:30 – 13:30
- Dinner 17.30 – 18.30
- Every Saturday: brunch at 11.30

If service users are unable to do so, please inform staff of any dietary requirements (e.g. vegetarian, halal, Caribbean or kosher meals).

Please feel free to bring appropriate food to the Crisis House for the service user or to go out for food together. Service users can order takeaways or make snacks in the kitchen.

How does Crisis House leave work?

There are no restrictions on leave. However, the Crisis House asks service users to fully engage in the treatment and opportunities available during their 2 week stay.

Service users are also encouraged to continue engaging in their regular day-to-day life. Please inform the Crisis House staff of any important meetings that the service user may have to attend.
What are the visiting arrangements and safety procedures in the Crisis House?

The Crisis Houses encourages service users to have visitors and to maintain contact with their friends and family.

Visiting hours are:
- Monday - Friday: 16:00 – 20:00
- Weekends and Bank Holidays: 14:00 – 20:00

If you wish to visit someone outside of visiting times please arrange this with staff prior to your visit.

Please inform staff when you arrive.

Sometimes, visitors may be refused entry if they behave in an abusive or threatening way, or seek to bring banned items such as drugs into the House (please see items to bring into the Crisis House section). This would be discussed with the visitor.

Unfortunately, children under the age of 16 and pets are not permitted in the Crisis Houses.

If the fire alarm sounds when you are in the Crisis House, staff will give directions immediately. The alarm sound will be continuous.
What happens when the service user is discharged?

Discharge from the Crisis House will be planned with the multi-disciplinary teams. A discharge planning meeting will take place. If appropriate, some service users will be referred to other services within the Acute Division such the Crisis Teams or Acute Day Units.

When an individual is discharged, a discharge plan will be available providing information about follow up support and who to contact in case of need.

Some discharged service users will be referred to new community teams within other divisions. These teams provide community support and follow up. Sometimes service users are allocated a care coordinator from the relevant community team. This professional acts as a key point of contact for the service user and their carers.

On occasion, service users are also referred to local voluntary organisations such as MIND.

For more information on Camden and Islington’s community mental health support teams, please refer to www.candi.nhs.uk

If you have any questions or concerns about discharge please discuss these with the team.
Useful contacts

How do I contact the Crisis House?
Main Switchboard number: 020 3317 3500.

How do I get more information?
Please feel free to speak to staff members.

Trust website
www.candi.nhs.uk

How do I raise concerns or make complaints?
You can speak directly to the Crisis House staff or manager about any concerns or complaints you may have.

Alternatively, you can contact the Advice and Complaints Service who will try to resolve your concerns. This service is confidential and open between 9am and 5pm Monday to Friday.

Phone number: 020 3317 3117
Email address: complaints@candi.nhs.uk
Office address: Advice and Complaints Service, Camden and Islington, NHS Foundation Trust, 4 St Pancras Way, London NW1 0PE

Useful websites
www.rethink.org.uk
www.mind.org.uk
www.carersuk.org.uk

Men’s Advice Line: 0808 801 0327
Solace Women’s Aid: 0808 802 5565

This information can be made available in alternative formats, such as easy read or large print, and may be available in alternative languages, upon request. Please contact Shabir Abdul at equalityanddiversity@candi.nhs.uk or on 020 3317 7170.