

CARERS, SERVICE USERS AND STAFF SHAPING OUR FUTURE - **TOGETHER**



Shining a light on the future



Editorial

HEAD OF COMMUNICATIONS

Will Green



You may be reading this because you’re a service user or carer, are interested in mental health and disability issues or you may just be flicking through it in a waiting room because it looked interesting (which we hope it is!)

Whatever your reasons, we’re happy that you’ve picked up a copy of our annual magazine and we hope it will give you a flavour of who we are and what we do. It would be impossible to fit all of that into one small magazine, but if you’d like to find out more you can visit our website at www.ntw.nhs.uk, search for us on social media or visit our blog at <https://ntwnhs.wordpress.com/>

As an organisation, we are one of the largest mental health and disability care providers in England, employing more than 6,000 staff, serving a population of approximately 1.4 million and providing services across an area totalling 2,200 square miles.

We work from over 60 sites across Northumberland, Newcastle, North Tyneside, Gateshead, South Tyneside and Sunderland. On top of this we also have a number of regional and national specialist services.

This magazine is a little bit of everything; small glimpses of some much larger issues, an introduction to some of our team members and some views on the future of mental health and disabilities care.

Throughout this magazine we’ll also be sharing with you some of our amazing service user art. You can read more about how all of this came about in an article by Jane Akhurst, our Arts Project Manager.

As an editorial team we’re always learning, so if you have any feedback please let us know (perhaps you have a topic or subject you’d like us to explore in the next edition?) just email me on will.green@ntw.nhs.uk or connect via Twitter [@willgreenNHS](https://twitter.com/willgreenNHS)

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Introduction



CHIEF EXECUTIVE
John Lawlor

Welcome!
I am delighted
to contribute on
our theme this
year about the
importance of the
Triangle of Care.

As a service user of our Trust and with my wife, Julie, a carer when things are not great, I am only too well aware of the importance of Julie, myself and the professionals that work with me being “on the same page” about how best to enable me to progress on my recovery journey.

As Chief Executive, I have seen and heard about some really inspiring examples of where staff, carers and service users are working together to great effort with good outcomes.

But I am also aware there are occasions when that is not the case. And this is why we are re-affirming our commitment to the Triangle of Care approach to ensure it becomes embedded across all of our services.

John Lawlor

John Lawlor
Chief Executive

The Triangle of Care

How including carers is everyone's business

“*Why involve the carer? They are already involved – and are likely to continue to be involved after the professional has moved on.*”

This was said by a Consultant Psychiatrist after they had become involved in implementing the Triangle of Care on their ward; it's a useful reflection and one that all mental health professionals should consider when they are working with service users and carers.

The Triangle of Care was launched in 2010 and Carers Trust has led on this across England working with mental health trust, the services we support, other carers' organisations and carers to embed it into services.

Northumberland, Tyne and Wear NHS Foundation Trust has been involved in the Triangle of Care since the early days and have been working on implementation across their inpatient and community

services as part of our membership scheme since 2013.

Good implementation can be challenging and many trusts who embark on this journey recognise this early on; since the launch of the membership scheme 33 Trusts have joined and a great deal of learning has been gathered to help support them and others who embark on this process.

A number of key elements are crucial for not only initial implementation but long-term cultural change. The first and most crucial of these is a Trust Carer Lead, for carers to become part of the core business of an organisation it is vital for someone to be steering this work. NTW have been fortunate to have

such a person and role and I feel strongly that this has helped them make the progress that they have.

In addition to a Carer Lead there must be strategic support. This is a senior management team that recognises the long term work that is required to properly embed the Triangle of Care with a willingness to face challenges with openness and dynamism.

Underpinning these two key leadership strands is a dynamic, active and engaged carer champion network who act as supporters and cheerleaders to their peers.

At all of these levels a strong partnership with carers and carer organisations is crucial to

keep the work grounded in the needs of carers and service users and enabling an organisation to measure the impact and outcomes for carers.

Finally, an organisation must be willing to be open and honest; the Triangle of Care isn't a programme of work that sets out to sanction trusts and their staff. It is there to support, encourage and nurture them to understand the needs of carers and how to enact culture change in their organisation. This can only be achieved if a Trust is willing to be truly candid and reflective about not only it's achievements but it's challenges and failings in relation to carers.

The Triangle of Care is programme of work that sets out to truly

embed carers in the culture of the organisation; it is a marathon and not a sprint. If we truly want the best for carers of all ages and those they care for we can only do this together.

Ruth Hannan
Carers Trust's Senior Policy
Manager for Adult Care



Community Services

In September last year the Community Matrons (Andrew Thorn, Lindsay Spencer and I) were asked to support a significant piece of work to acquire accreditation with the “Triangle of Care” for the Community Services within NTW.

“ We are following in the footsteps of in-patient services; building on the work already undertaken on the wards, not just to acquire accreditation for Community Services but maintain the accreditation for inpatient services also. ”

A Trust wide event was arranged to include the Carer Champions, local Carer Organisations and Team leads across community services where we had the opportunity to hear from Ruth Hannan who provided us with the inspiration and guidance to help us on our way.

Over the past nine months the Community teams have worked really hard not just to complete the self-assessment but also improve the Carer experience. It's really great to hear about the work that the teams are doing and seeing a strengthening of the relationships between NTW and our local Carer Centre's.

One of the requirements of the Triangle of Care was to establish

a Carer champion Forum. I am fortunate to be part of the forum for Sunderland and South Tyneside. I look forward to this forum; there's always good representation from teams and our local carers centres and a really positive atmosphere. The Carer champions have started taking turns presenting examples of good practice; showcasing the work that their teams are doing to improve the Carer experience and sharing with their peers.

The Community Teams are currently in the process of reviewing their Triangle of Care self-assessments prior to submission in October. Already teams are reporting that they have been able to change some of the RAG ratings from Amber

to Green and feel a real sense of achievement. Andrew, Lindsay and I feel really privileged to be working with the teams on this project and look forward to NTW receiving a dual accreditation, but more so knowing that this will make a big difference to people's lives.

Emma Bailey
Community Modern Matron

Working together to make learning disability and autism services better



We are using co-production to improve and develop services within the Learning Disability and Autism Transforming Care programme. We want to understand what life is like for people receiving our services and what needs to change to make it better both on the wards and in the community. We have had a couple of events including some early work in Secure and children's inpatients services to make sure that everybody could be involved including those whose voices

may not usually be heard. We have been supported by Rachel Simpson, NTW Governor for Learning Disability.

One participant commented that "Even good services can improve their patient experience by listening to service user views" which sums up the approach we want to take as we learn how to do this together. At all the events it was clear from the noise and comments that people were happy to have their say and make suggestions for improvement.

Some clear messages have come out from the events to date.

To really engage and work with people and their families we need to go out and talk to people in their own groups and not expect them to come to us. To do this properly we need to take time to talk, listen and explain what we are trying to do but also look at what we can do together – this will make information really accessible.

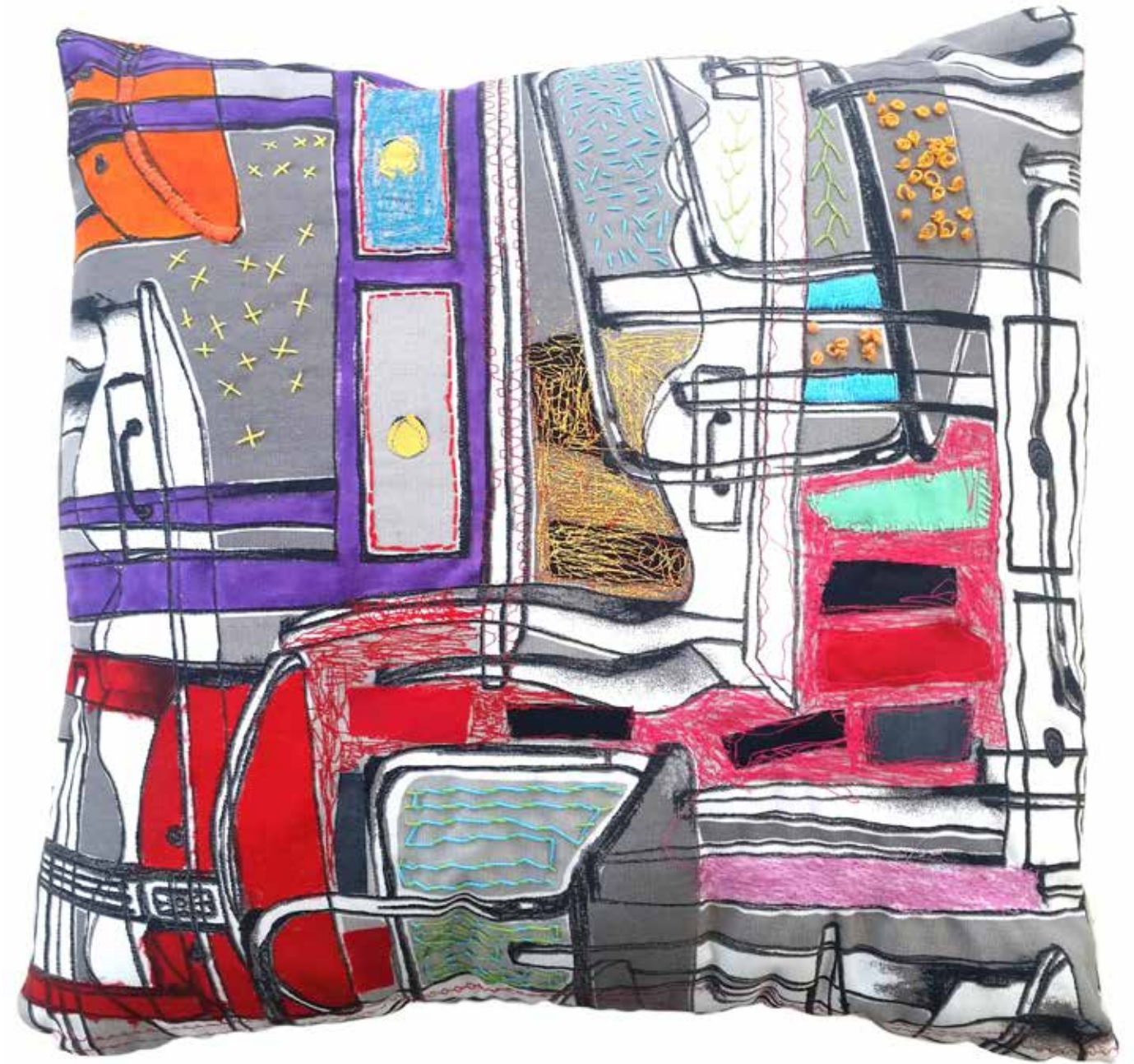
People need time for us to do this properly

- Think about how we behave and interact with people at all times
- Think about how it feels as the person in all of this – it is not always just about health needs
- Spend time and find out about the person- stop making assumptions
- Give people respect, dignity and value their contribution
- Stop using jargon or abbreviations – use the actual words or explain the words you are using
- 'Can health professionals stop pretending that they know it all?'
- The best way to explain things or find out about things is to talk to the person and spend time with them
- Stop exclusion and prejudice
- We need to look at how we work together to provide teaching and training with local groups to stay well.

From the first event NTW has arranged for Quality Health Checkers to come in to in the Sunderland Community team and the Newcastle Community team and Rose Lodge assessment and Treatment Unit. They will be doing this in May/ June and we will share what they find. We have also started some work with Project Choice to look at how we support more people with learning disabilities and autism with employment.

We are very much at the start of co-production and look forward to learning and developing this work together over the coming months. There will be a particular focus on how we talk to more people with autism and also carers of people with learning disability and autism.

Caroline Wills
Learning Disability Clinical
Development Lead



Reflections on care

I'm delighted to share some reflections about how carers, service users and staff can work together to shape their own future and that of the services we provide. My perspectives come from both my role as the newly elected UK Chair of the British Psychological Society's Division of Clinical Psychology and as NTW's Clinical Director of Psychological Services.

Listening to family members and carers can be a very humbling as well as an inspiring experience. This can be in making us aware of key information about our service users' mental health, relationships and background history of which we may be otherwise unaware. Or in recognising how hidden family members' and carers' needs can be, and how much more could and should be done to support them in their own right. Also in hearing how much we can improve our communication with family members, in line with the wishes of the service user and "common sense confidentiality".

The Carers' Trust "Triangle of Care" is a fantastic initiative aimed

at achieving better collaboration and partnership with carers in the service user and carer's journey through mental health services. It's important to note that the carer is on a journey as well as the service user, and that we need to consider how to make every step of that journey as smooth and productive as possible. The three equal sides of the triangle symbolise that all three parties are equal in the relationship – Service User, Carer and Professional. If we embrace the concept of the equal relationship from the very beginning of the service user's journey, we can do our best to ensure that we have the best possible understanding of the person and their family and

relationship context. We can agree how best to communicate with each other and ensure the consent and confidentiality issues are clear but are not barriers to appropriate communication. We can maximise the chances of improving wellbeing and moving towards recovery for the service user while also ensuring family and carer needs are recognised and addressed.

The central issues at the heart of the triangle of care are relationships and communication. Psychological theoretical knowledge and clinical skills can be of great benefit in these domains. For example, an understanding of attachment

theory can help us understand why forming trusting relationships might be difficult for some service users and family members. From an awareness of how a family is functioning through to formal systemic and family therapy, psychological knowledge and skills can be used to work successfully with service users and family members where relationship issues and communication can be very challenging. We need to ensure that these approaches are more readily available to those who could benefit.

We can also use the principles of the triangle of care to work together on service improvement. This can be done at local, regional

and national levels, involving local service users and carers, service user and carer governors, local groups such as Launchpad and national groups such as the Carers' Trust and NSUN (National Service User Network). For example, service users and carers have significantly influenced and improved the redesign of NTW's community pathways. Expert by Experience representatives nationally work across a range of initiatives in the Division of Clinical Psychology, and I work with them closely, for example in my BPS work with the Royal College of Psychiatrists' Centre for Quality Improvement on the Accreditation Programme for Psychological Therapies Services (APPTS). The

perspectives of service users and carers have helped to shape the standards for APPTS accreditation and the ways in which evidence is gathered and evaluated.

I believe NTW can play a significant role in supporting and participating in further partnership working to re-shape our services to benefit service users, carers, families and communities, so that we really do shape our future together.

Dr Esther Cohen-Tovée
Clinical Director,
Psychological Services



Making a difference

NTW's charity was established in April 2016 and the charity's purpose is to benefit the current and former service users of NTW to live a fuller and happier life. The SHINE Fund was established as a general fund which can be accessed by all NTW services. The SHINE Fund can make a real difference to funding the things our service users and carers would like to have and like to do above a normal level of service government funding pays for.

Charitable donations have already made a huge difference to those who are cared for in our various hospital sites and who access our community services.

Charitable funds has supported a lot of the additional equipment which NHS funding alone could

not afford, such as equipment for garden and arts projects, garden furniture, digital touch screens, interactive games, gyms, snooker and table tennis tables and sensory rooms at Ferndene and Walkergate Park.

Charitable funds has also supported many therapeutic and social activities, such as excursions and events. Party in the Park and the extras at Christmas have all been funded from charitable funds as well as day trips, afternoon tea dances and community access outings.

A number of community groups have been established using charitable funds including cycling groups, a football group, a music group and mindfulness groups.

Some excellent fundraising events have been taking place to raise funds including the Summer Dog Show at Hopewood Park, the family fun day at Walkergate Park, Run Bob run, the Total Warrior challenge, bake days and Christmas jumper and Christmas fayre days.

Fundraising events and the extra things charitable funds supports can really help to shape our services and are great opportunities to bring together service users, carers and staff to work in partnership together through the Triangle of Care, have fun and make a difference.

Charitable funds has done a lot so far, but now NTW has its own charity we want to be able to do so much more. We want to be

bigger and better and we can only do this by more of our service users, carers and staff getting involved.

So over to you. Can you think of something good you would like to see happen and what could we do to raise funds to make it happen? If you would like to find out more contact charitable.funds@ntw.nhs.uk or telephone 0191 2467215.

Tracey Sopp
Head of Transactional Services





What better job?

What influences the care I deliver as a Community Psychiatric Nurse (CPN) in NTW?

Wow big question! I always try to ensure that the care I deliver is planned collaboratively with the service user I am nursing. You may wonder why I do this; is it because that's what is taught at university these days? No it is because I have been on the other side of the fence. I have been the service user who through illness had lost control of so many aspects of my life and who was likely labelled a 'difficult patient' when I questioned my care plans and decisions which were made, I'm sure with the best of intentions, for me not with me. I am an educated, articulate woman why would I not want to make informed choices about my care?

My experiences as a user of services influences the care I deliver as much as any lecture on compassionate care I have attended however I am obviously acutely aware that each person I nurse is an individual with their own different needs and that my job is to adapt to their needs.

As a CPN I have the absolute privilege to walk alongside those I nurse during their own journey of recovery, I am there to celebrate their victories with them and to offer support and strength on the tougher days. I always try to get to know not just the person I nurse but whoever is important in their life to whether that is family or a friend and it is matter less to me whether those supporters are 'carers' in the official sense of the word or not. If they are part of the person's recovery journey then it is my responsibility to try and forge a relationship with them too. Recovery can happen alone but it's often an easier and quicker journey when the person with mental illness has a body of support around them, just like when a football team line up to support

their goal keeper at penalty time if the mental health service user has their 'team' line up to prevent the curve ball that is mental illness getting through then they are more likely to achieve recovery.

There is a power imbalance between the clinician and the service user and to a point there always will be. Clinicians are the ones who can initiate hospital admission against a person's will or who sometimes delivers medication that a person would rather not take. Us clinicians can say all we want that we hope to achieve an equal partnership but part of doing that in my opinion is recognising and acknowledging openly that the power imbalance is in fact there. The more we ignore that the bigger the imbalance becomes. We can sway the percentages of balance though by ensuring that we make decisions with people and not for them and that we give all the information to allow someone to make an empowered, informed choice, even if as a clinician we think this choice is unwise. This is a huge shift in the role of the clinician whether nurse, medic or allied health professional but it is a shift in culture we all need to adapt to.

Mental illness is a thief, it steals hope. I have seen the loss of hope in so many eyes as they have been given a diagnosis, medication and told of waiting lists, my job is to help give back some of that hope. What better job can there be than being able to tell someone that 'it can get better' and truly believe this having been there myself?

Claire Keys
Community Psychiatric Nurse
and FT Governor (Clinical Staff)
Gateshead Non-Psychosis
Community Treatment Team



Care across Northumberland

Northumberland, Tyne and Wear NHS Foundation Trust, like most institutions, can take a long time to embrace change.

However, in some areas the determination to make that change from the top management to the front facing staff and back up again, culturally and clinically does make a difference to people's experience.

The Triangle of Care is an example of how such change can make a real difference to service users and carers. The Trust is a member of the Carers Trust Triangle of Care national scheme. The scheme promotes safety and recovery for people with mental health issues and supports the well-being of carers. For a Carers Centre such as Carers Northumberland the implementation of the Triangle of Care and the regular checks and training for staff is an invaluable tool in supporting carers and bringing together the Trust and the Voluntary Sector in partnership with carers. The adoption of the Young Carers Triangle of Care is part of this change to recognise the need for a whole family approach to people's well-being either when they are in treatment or when their only support network is their families and friends.

This year the partnership with the voluntary sector and the Trust has moved forward to embrace Carers Champions as a link to the sector. Adopting the Triangle of Care and recognising the links with "Common Sense Confidentiality" has enabled more open discussion about the needs of carers both young and adult and how they can be supported as "experts" by experience.

Carers Northumberland supports carers across Northumberland and builds partnerships to ensure we can reach as many family/friend carers as possible. Even small changes enables us to do this. A good example is the opening of the Family and Friends Resource Centre at St George's Park, just the act of giving up a room solely as a space for family and friends to be when they need a break from caring sends a real message that carer involvement and participation are important.

Sharon Spurling
Chief Executive,
Carers Northumberland

Your NHS

I've been fortunate enough to be involved with membership at NTW since 2010 and to see at first hand the microcosm of how our Trust works to involve the public, staff, service users and carers in how our services provide care.

At NTW we have about 18,500 members, consisting of 6,500 staff and 12,000 public members, divided into service users, carers and public constituencies. All members are represented by elected governors along with appointed governors who sit on our Council of Governors. Members are also regularly invited to participate in governor elections, as and when vacancies arise. NTW sees governors as one way of working more closely with the people they serve and in particular, carers and service users.

Being a member of a large NHS mental health and disabilities Trust has many benefits, including receiving regular information about the Trust and getting the opportunity to be involved in issues of interest. Members are invited to elect other members to represent them on the Council of Governors or can stand as a governor themselves.

Our membership newsletter, which is either posted or emailed to all members every four months, aims to inform members of Trust activities and as well as membership news, such as notice of elections, includes designated pages to carers, service users and staff. Members are always welcome to submit articles or comment on its content.

All members are invited to our Annual Members' Meeting (AMM), where they can chat to staff and governors to learn more about service provision and future plans. They can also browse the diverse information stalls, including a dedicated membership/governors stall and this year, a regional carers' combined stall staffed by

governors and carers, with enough time to chat over a nice cuppa before the formal meeting begins.

NTW recognises the importance of better collaboration and partnerships with carers to ensure as smooth a journey as possible through mental health services, not just for service users but for carers and their families. A strong membership, representative of the local community, is one way of linking up with everyone involved with NTW, in one form or another.

The Trust recently celebrated 10 years of care as NTW, during which time a lot of membership

recruitment has taken place. Members and governors contribute to NTW on a voluntary basis and the Trust relies on them for feedback, support and local knowledge. Amidst a future of devolution, our member governors also ensure we continue to comply with our vision, mission and values, which in turn reinforces a shared shaping of care and services.

NTW would like to encourage even more Service Users and Carers to join us, especially from the Older People's Services and Neuro Disability Services constituencies, as this would enhance and strengthen our membership

representation. Without our members, there would be no Northumberland, Tyne and Wear NHS Foundation Trust.

Wendy Pinkney
Corporate Affairs Officer





Children and young people

Participation and involvement of young people, families and carers is proving really helpful in shaping the Service Development process.

Investment in a new Children and Young Peoples services scheme is providing innovation and challenge, and the management team have signed up to be fully accountable to provide evidence of change as a result of the feedback.

As part of a recovery plan, young people have reported favourably on the therapeutic benefits of projects such as the Newcastle Helix Film Project premiered at the Tyneside Theatre, the Takeover Day with Northumberland County Council, and the South of

Tyne 'Evaluate your Experience' participation group. As a service we know we benefit immensely from the learning we gain from young people involved in the services we provide. The new scheme provides an age appropriate link to the pioneering work of the Peer Mentors, Recovery College and developments through Triangle of Care.

To build on this very positive theme of collaboration with patients, families, partners and commissioners, CYPS has invested in developing opportunities to employ a team of young Participation Apprentices. Under the guidance of an experienced Action for Children Participation Lead who works with us the young employees are bringing fresh energy, innovation and challenge. Based in the community, the team are developing new ways of working to support children, young people, their families and carers, service staff to jointly shape Mental Health and Learning Disability services together. This is now combined with continuation

and development of a very positive experience of working with an 'arm's length' partner, Action for Children over several years to provide information on service user views, challenge practice and identify priority themes. Apprenticeship posts now exist for young people aged over 16, and already we are benefitting from the Apprentices use of their own skills and experience. The Apprentices are based across both North and South of Tyne services, linked into NTW processes, and work closely with partner agencies to create helpful opportunities for patients to have their say. The focus is on inclusivity, providing opportunity, proof of change and feedback mechanisms. Working in genuine collaboration shifts the balance, and our young people and families will certainly let us know their views on our progress

Jan Brown
Pathway Development Lead
Community Children and Young People's Services

Hopewood Park

a service user's story

Hopewood Park has an excellent variety of services to help you relax and recuperate.

It's an ideal place when you're feeling depressed and anxious. I felt welcome and included by staff and other patients.

As far as activities go, there are lots of them – art, crafts, gym and exercise classes. There is a fully equipped gym with cardio and weights and an individual plan is created for you. You can participate five days a week. In the art class we are also doing a project – painting on individual canvasses an image of what recovery means.

There is also lots of spare time to relax and read at leisure. Although it can get a little overbearing, that is because I'm used to being busy. It's a good idea to learn how to relax properly and a team member can go through meditative techniques.

The reviews help me put my recovery in perspective, which is important. I often wonder about why I'm here, what I want to do but talking it out makes it more real.

The beautiful countryside adds a nice tone to the surroundings. I'm a city dweller so to breathe in the fresh country air is nice.

So, to sum up, Hopewood Park is a splendid place for relaxing and is routine enough for daily getting up, active and healthy. The rehabilitation and being introduced back into the community element is very good as well.

A service user





There for you

As Chair of the UNISON Branch and Staff Side Secretary I take a lead role on NTW staff side. Staff side enables all unions to work together with the Trust to make sure staff's concerns are addressed.

We work with the Trust to make sure that staff are fully represented and negotiate on their behalf. The role of staff side provides a unique insight into the workings of the Trust as well as an understanding of the range of work our members do, and the pressures and complexities they have to deal with, on a daily basis.

Mental health services are faced with increasing demands including different ways of providing the services. We believe that key to providing an excellent service is the staff of the organisation and that their development and ability to access learning is key to this; we have recently signed a learning agreement with the Trust to further enable this. That said, we recognise that improved care has to be linked to the needs of the

service user and we are committed to local strategies that involve carers and their families in the care planning and treatment of people experiencing mental ill-health.

It is important to realise that many of the staff, and union members, will also have additional roles as carers for family members or have experience of receiving services. As a trade union UNISON has always provided support for members who need help via our charity 'There For You'. Staff side work with management to make sure that staff who are also carers are supported.

The NHS will be 68 years old in July 2016; it has seen major changes since its inception when it was the first health service based on need, rather than

ability to pay. This has led to an improvement in mental health services, allowing a stronger voice for service users and their carers. You just need to look at how one of the Trust's major sites, St Nicholas Hospital, has changed over the years to realise this. UNISON and the other staff side unions are committed to the NHS, to improving service and to the development of good practice.

Tanya Pretswell
Staff Side Secretary

Guiding loved ones out of addiction

Northumberland Recovery Partnership (NRP) has a history of working with the families and loved ones, or carers, of the clients who use the addictions and recovery service in Northumberland. This has taken the form of family days or carers groups at NRP locations. Carers have attended these groups to gain a better understanding of what the addictions and recovery service can offer their loved one. A key feature of these gatherings is that carers are benefitting themselves from the 'mutual aid' support they receive from each other. They have said that they are able to share their experience, strength and hope with each other as a result of talking together. They said they gain strength and support for themselves. They said they have realised that they are not alone.

At the request of carers, a new group is starting at the Recovery centre in Blyth. This group will meet once a week outside working hours to allow carers to attend. The group starts in June 2016. The group will be facilitated by NRP staff and will use the Community Reinforcement Approach and Family Training (CRAFT) model of carer support.

CRAFT intervention is an evidence based intervention designed to help carers to engage their loved ones into treatment. This was developed with the belief that family members can, and do make important contribution in other areas of addiction treatment- it is often the substance user who reports that family pressure or influence is the reason they sought treatment. Carers who attend the CRAFT program also benefit by becoming more independent

and reducing their depression, anxiety and anger symptoms even if their loved one does not enter treatment.

CRAFT uses an overall positive approach and steers clear of any confrontation. It is a culturally sensitive program that works with the client's beliefs to develop an appropriate treatment plan. The program emphasises learning new skills to cope with old problems. Some of the components include how to stay safe, outlining the context in which substance abusing behaviour occurs, teaching carers how to use rewards and how to let the substance user suffer the natural consequences for their using behaviour.

Greg Carroll
Northumberland Recovery Partnership





The way we work

Mark Spybey
Head of Team and
People Development

In October of 2015 we used a series of Speak Easy engagement events to help us to engage with service users, carers and staff about a proposed set of 'guiding principles' for the organisation.

Why? Simple!

Aren't we all investors in the NHS? Aren't we all shareholders in NTW? The NHS touches our lives, it touches the lives of those we love and those we care for: delivering great care, for people like you and me. Care that is of the kind of standard that we would want our loved ones to receive. So we all have a vital contribution in making sure that this Trust is as great as it possibly can be.

Our work is influenced by the context that we live and work in: the money, the politics and the numerous other factors that impact on how we are able to work as an NHS Foundation Trust. Now we may not always feel that we have that much control over all of these factors but we have to adapt what we do to meet the challenges of our time. This results in changes to the way we work. These changes are experienced and felt by everybody: service users, carers and staff. The context impacts on the culture of the organisation: 'the way we do things round here,' and this is felt by us all. The way we behave, the way we communicate has impact on service users, carers and staff.

Sometimes we need to reflect, take five and to talk to each other about things that really matter.

That's where the 'guiding principles' come in. So what do we mean by 'guiding principles'? Well it's a way of stating our purpose, or a way of setting out our agreement to each other. It's about the big questions of "why do we (as an organisation) exist?"

Why do we need to do this now? We live in a world of change. So therefore we need to think more about how our culture (the way we do things round here) needs to change. What's worked for us in the past may not work for us, as well, in the future. When I say the word 'we' I mean just that. This work should feel relevant

to service users, carers and staff. This is our stated commitment to each other. This is how we will go about our business.

So please take some time, over the coming months to have a look at the guiding principles. We will be launching them soon for further consultation. There are only six of them and yes, we are interested in what you have to say about them. When we shared them before to over 200 of you, during the Speak Easies you told us that you liked them, that you understand why they are important but that they could have been tidier, more punchy and easier to read. We have reworked them and dozens of folks have helped us to get to this point. Watch this space!

ONE	We will seek to provide world class care, treatment and support.
TWO	Together we will be clinically led and professionally managed at every level.
THREE	We will listen to and hear staff, service users and carers
FOUR	We will support staff to know what we need to do and why
FIVE	Together things will improve by influencing what's going on around us
SIX	We will enable people to make decisions locally within an agreed framework

Carer involvement

My name is Tony McAnelly.

I have been privileged to be employed by Northumberland, Tyne and Wear NHS Foundation Trust as Carer Involvement Officer since May 2005. My role over the past 11 years has enabled me to work closely with family carers to see how their invaluable role can be truly recognised by all staff throughout the Trust.

In 2008 the Trust held its first Carers Conference entitled "And Carers". This somewhat unusual title was chosen by carers to emphasise the general consensus that family carers were often seen as an 'add – on' when describing 'User and Carer' involvement.

A survey of carers carried out prior to the conference, revealed a significant level of concern among family carers. They often

felt excluded and rarely received adequate information and support to enable them to carry out their caring role. The outcome of the survey resulted in the launch of the 'Carers Charter' written by carers and agreed at the conference by the Chief Executive and the Director of Nursing.

This symbolic signing the Charter, committed the Trust to;

- Recognising and valuing Carers.
- Sharing information and advice.
- Involving carers in the care and treatment of the person they care for
- Involving carers in the planning and consultation of Trust services.
- Providing them with help guidance and support.
- Recognising 'Young Carers'

Following this conference I worked closely with both carers and staff to see how we could make the necessary changes to achieve the standards expected of us by family carers.

By developing;

- 'Commonsense Confidentiality' with its staff guidance and extensive training I hoped to help staff feel more confident about sharing information with carers. And by producing a booklet for carers I felt it would enable them to have a better understanding of confidentiality and their rights as a carer to receiving essential information to assist in their caring role.
- 'Getting to Know You' procedures would ensure that carers could be involved in the treatment of the person they cared for. These procedures were also aimed at emphasising the value of their role as carers. By arranging to meet the family at the earliest opportunity staff would get to know the main carers, identify the possible involvement of 'Young Carers' and consider what information, advice and support they might need.

- A 'Carers Pack' designed by carers to provide detailed information about the Trusts carer policies and procedures as well as information on local carer services would help both carers and staff.

To further assist the implementation of these measures, each ward and every service throughout the Trust appointed 'Carer Champions'

whose role it is to actively promote carer involvement and to encourage their colleagues to take an active interest in carer issues. Senior managers within the Trust coordinate their role through area forums. Each forum invites local carer centres and services to its regular meetings which fosters close working relationships, facilitates staff training and enables carer champions to receive information and support.

In November 2015 the Trust held another carers Conference in Newcastle to consider how much progress had been made in implementing the principles of the 'Carers Charter'. Over 200 delegates comprising of carers, carer organisations, carer champions and senior staff attended the conference.

The conference opened with a powerful presentation by a 'Young carer' who shared her experience

as an eleven year old caring for her mum who suffered from a mental illness. It drove home the importance of carer recognition and the importance of identifying 'Young carers' at a very early stage. My presentation which followed posed the questions had 'Getting to Know You' and the other carer procedures been fully implemented and had carers noticed the difference.

The group discussion which followed highlighted significant improvements to our overall approach to carer recognition and a growing confidence among staff to include carers at the earliest point of contact. More importantly however there was an overwhelming drive to address areas highlighted by carers where further improvement was needed including the importance of achieving service equity between urban and rural areas.

The conference concluded with an address from the author of 'Triangle of Care' Alan Worthington. Alan had attended our first conference in 2008 to tell us about the principles of 'Triangle of Care' which unsurprisingly mirrored our 'Carers Charter'. At that conference, he had shared his hopes and aspirations that our Trust and many others would work towards achieving these principles. Seven years on he was able to express his delight that our Trust was now one of a growing number of Trusts nationwide that had signed up to building working partnerships between carers, staff and patients and had already achieved a gold star rating.

As I approach retirement I am heartened by the enthusiasm throughout the Trust to working towards achieving all the six principles of 'Triangle of Care'. In shaping the future however, we must not lose sight of our past. In 2008 carers showed us the way forward by producing the 'Charter'. With their involvement they steered us through the changes to our carer procedures and with their involvement they will continue to judge our success.

Tony McAnelly
Carer Involvement Officer





Art in a Caring Community

‘No man is an island’ is a good place to begin in thinking about care and how that relates to the work of the Arts Project within Forensic Services.

The Arts Project team seek, wherever possible, to maximise the life opportunities through art for patients and to support the pathway to lasting recovery both within in-patient services and beyond.

It would be impossible to do this in isolation. For our patients, social inclusion and positive relationships are protective factors helping to decrease the likelihood of re-offending and to foster hope and a sense of purpose. Good communities are vital to this and it is with this aim in mind that the Arts Project sets out to link in with other agencies who can support access to the arts at all stages of patients’ recovery. Positive relationships are modelled within Arts Project workshops too, where patients come together in less clinical surroundings to explore creativity in a cheering and friendly space surrounded by many colourful and interesting works of art.

There is a sense of community when patients can explore creativity with tutors who are themselves artists and there is something joyful about the opportunities that arise whereby artists and patients can exhibit work side-by-side, as in last year’s Woodhorn Museum exhibition ‘Into the Light’ and later again this year, at a planned exhibition at the Customs House. Commonality and shared interest form the basis for sustaining relationships in all walks of life. And, of vital importance, these features are a way to increase self-esteem and promote a positive sense of identity in the individual.

National organisations such as the Koestler Trust (with its annual national art competition open to prisoners and patients in secure services) play an enormous part in supporting patient well-being and recovery. The competition and annual award ceremony, now key events in the Arts Project calendar, gives patients the opportunity to win awards based on artistic merit and have their artwork judged by art world luminaries such as Grayson Perry. The Koestler Trust also provides a mentoring project to match individuals with professional artists to further their development as well as ‘Friends and Families Days’ hosted at the regional Koestler exhibitions.

‘Outside In’ are a national charity aimed at supporting artists who have difficulty in accessing the arts due to reasons of health or social exclusion. The charity hosts an on-line gallery where individuals can upload an Artist’s Statement and images of their artwork. The charity also provides a wealth of other arts opportunities, solely for its users, linking in with UK galleries and organisations such as the National Trust. Through the Arts Project working with this organisation, one former patient, now settled into the community, is not only able to have her artwork on public display but will soon have the opportunity to sell her work and have it shown to collectors at an Art Fair in Paris in the autumn.

Locally there are a number of great Third Sector arts organisations who can support patient’s care in transition from in-patient services, moving forward, including a home-grown NTW Outreach Art Project in Northumberland in the

first stage of development. The Arts Project works with the OT team and other clinicians who are directly involved in patient care to develop good and sustaining arts placements suited to individual need. Local organisations include Chilli Arts Studio and the Recovery College, both based in Newcastle, and the Art Studio in Sunderland. The Art Studio has recently offered a 3 day weekly placement to a patient with particular artistic talents. At this wonderful venue, professional artists teach in all the arts disciplines, the studio having exceptional facilities in pottery, printmaking and textile art and providing individual studio space.

In these caring communities, through regular creative activities, positivity, opportunity and hope can flourish.

Jane Akhurst
Arts Project Manager

Mental health and Deaf people

“It is recognised that Deaf people have difficulties in accessing health services. This is particularly true to those people who are born deaf or lose their hearing before they develop speech, and for whom their main method of communication is British Sign Language.”



However, Manchester is a long way away and so the North East is fortunate in being one of the few areas which also has a community service. In fact, our service was the first stand-alone community service to be developed in the UK when it was set up 20 years ago. This was largely through the efforts of Joyce Pennington who was working as an in-patient nurse when she came across a deaf patient, and realised how the system failed to meet their needs. Since then, she has worked tirelessly to develop services and to speak up for the rights of deaf people. Currently, our service is one of the most well-established in the country and is the only community team in England to have a psychiatrist working in the team.

Our service now consists of two Clinical Nurse Specialists and a part-time Psychiatrist. We are shortly to welcome a support worker to our team who is herself deaf and who will bring particular

For these people, English is at best a second language and many of them have difficulties with written English. Added to that, many deaf people have had lifelong experiences of schooling problems, poor access to work, - together with misunderstanding or downright discrimination from the hearing community.

As good communication is an essential part of mental health care it is not surprising that deaf people have had particular difficulties in accessing effective treatment. To remedy this, the National Deaf Service has been developed with centres in Manchester, London and Birmingham, to which all deaf people with mental health problems can be referred.

insights into the Deaf community. Joyce is a fluent sign language user and all the other members of the team are learning sign language, although we rely a lot on BSL interpreters.

The team will see anyone with a mental health problem who is deaf and who is aged 18 or over. We cover the whole of the NTW area and also the Tees, Esk Wear Valley Trust area down to, and including, Teesside. Because of the wide area that we cover, the fact that we are small team who work with people with a wide range of problems, we work closely with local community mental health teams and other specialised services. Sometimes, after an assessment, we find that people who have mental health problems do not need our service and we signpost them on to other services such as counselling services.

The team also work closely with other agencies involved with deaf people, such as local charities, Social Services, and colleges. We have links with the National Deaf Children and Adolescents Mental Health Service which is based in York, but which has a team in Benton House, Newcastle. A lot of our work involves educating others about the needs of deaf patients, and deaf people about how to use the NHS. We have spoken to a variety of health professionals and lay groups in the past. Over the last few years, we were involved with the Clinical Reference Group which advised NHS England on commissioning mental health and deafness services (although this group has now been disbanded). We are currently involved with other deaf services and the

Royal College of Psychiatrists in drawing up guidelines to help Clinical Commissioning Groups commission deaf-friendly counselling and psychological services- an area that has been overlooked in many areas in the past.

Recently, NHS England published its Accessible Information Standard which requires all health and social care providers to assess and meet the needs of people with communication difficulties. This, for instance, involves understanding that although a deaf person may have some residual hearing boosted by hearing aids or may be able to lip read to some extent, that person may prefer to use British Sign Language. In such cases, a registered BSL would need to be booked. Implementing these standards will be a great challenge for the National Health Service but will hopefully greatly improve the services that deaf and other people with communication difficulties receive.

NTW Patient Information department have been very supportive of our service working with the deaf charity SignHealth, and a local deaf organisation, Becoming Visible, they have produced British Sign Language versions of the Trust's nationally-recognised self help guides. These BSL self-help guides are available on the internet, (www.ntw.nhs.uk/pic/selfhelp) are also available as an app for iphones and ipads. Feedback from our deaf service users about these has been very positive.

Within mental health services these days, care is very much “recovery focused”. This is

about service users having hope, ambitions and control over their own life and symptoms, and having the opportunity to build a life beyond illness. This philosophy has led to the development of recovery tools, such as Recovery Star and WRAP. However, deaf service users have found these standardised packages difficult to access due to a reliance on English. Also, mainstream Recovery packages do not always capture the lived experience of deaf people.

A two year CQUIN (Commissioning for Quality and Innovation project) was agreed with NHS England in which deaf professionals and deaf service users from all specialised services in England took the lead in developing a recovery framework, in order to engage deaf service users in a meaningful and collaborative recovery.

Our local “Recovery Forum” was co-facilitated by Joyce, and Joanne Fortune, NTW Deaf volunteer, and made up of local deaf service users. It fed into the national discussions, and played a vital role in ensuring that the final package, “All About Me” is accessible to deaf people. Deaf people have long faced great difficulties and barriers. We all face challenges but hopefully, with greater awareness about the needs, culture and rights of deaf people, we can break down those barriers to care and truly “shine a light on the future”.

Mental Health and Deafness team
Walkergate Park



Information for all

“ I think there is still a misconception that Library and Knowledge Services (LKS) exists solely for the clinicians in the Trust. ”

NHS libraries were set up originally to meet the educational needs of doctors, and this is still an important part of our work, but over the years they have evolved to support the information needs of all NHS staff; clinicians and non-clinicians.

Our vision is to provide ‘a service that is available, visible and accessible to all NTW staff and students, which nurtures and supports lifelong learning and ensures that everyone can access high quality knowledge and information to ensure that the care of service users is always informed by evidence, used at the right time, in the right place’. Something of a mouthful, but it is at the centre of what we do.

Our literature searching and current awareness services, along with the provision of articles and books, help our colleagues to make patient treatment and service development decisions based on the best evidence available.

We are being tasked nationally to extend our services and work in partnership with key stakeholders to ensure that “the public, patients and carers have the right knowledge and evidence, when and where they need it.”

Although this does present some challenges, we in NTW LKS, are confident that this is achievable. We already have some services in place and have established good relationships with several partners. Here are some examples:

Patients and carers can join the library at Walkergate Park. They can borrow books from the patient collection, pick up leaflets on neurological and other conditions, and request other information. Dedicated computers and a printer are also available for their use. Patients, accompanied by a member of staff, are very welcome in all of our libraries.

Over the years we have established strong links with Newcastle Public Libraries. The partnership developed Health and Wellbeing collections (self- help books and NTW Trust information) which are available in public libraries throughout the Newcastle area. That process first introduced me to the ‘Pictures to Share’ collection of books. Designed for people with dementia, they encourage communication and discussion with staff or carers. We now have our own set of books and DVDs, as well as a set of ‘Memory Bank’ resources, which we loan out for use in our inpatient and community

settings. We hope to develop these resources further to provide ‘memory boxes’ which will include the books and other items to spark conversation and interaction.

We are developing links with the Recovery Colleges. We have helped Tyneside Recovery College to set up a library, and I am working on a ‘Finding and Evaluating Information’ module to be offered through all the Colleges. Recovery is also supported by our extensive collection of WRAP (Wellness Recovery Action Plan) resources. We have also helped colleagues to set up their own patient libraries, and have donated novels to them from our ‘Recreational Reads’ trolleys; a free book exchange, which is available in all Trust libraries.

The Trust values are at the heart of all we do. I am proud to have a team around me that upholds those values on a daily basis, and feel very privileged to have a job in a Trust that not only allows and supports, but actively encourages me to do what I can to make a difference to people’s lives.

Sheena Hanes
Head of Library and
Knowledge Services

Volunteer involvement

When I was approached to write about NTW volunteering in relation to 'shaping our future through the involvement of Carers, Service Users and staff', my first reaction was 'our volunteer roles don't really fit into this, we help service users and staff but do we really do anything substantial in association with carers?'

I then stopped and reflected on the many and varied roles that our amazing volunteers fulfil and changed my stance a little.

NTW deploys a valuable band of volunteers who tend to beaver away quietly in the background, spending time listening and supporting service users, offering motivation to engage in social activities, gaining direct patient feedback upon discharge and in many cases acting as a positive role model of recovery.

Some of our volunteers play an active role in shaping services by listening and representing patients' views and opinions

within their area. The Service User and Carer Reference Group offers them an additional forum to express opinions in a constructive atmosphere and consider the thoughts and ideas of both service users and carers from other areas of the Trust. This wealth of shared experience and insight offers NTW the opportunity to identify issues and initiate change.

Our volunteer initiatives are predominantly 'needs led'. Needs are often determined collaboratively between Service Users, Carers and Staff in order to provide optimal patient centred care. In addition to clinical

interventions, identified need can include the involvement in new social activities and re-engagement with familiar interests, which is invaluable in helping to re-gain confidence, raise self-esteem and offer distraction from illness. Volunteers support staff by widening the range of activities available. They offer the precious commodity of 'time' to listen to service users, discover their interests and wherever possible tailor activities to meet their needs. Whether they organise a fun game of carpet bowls or pool, assist with a cooking group or simply take the time to chat, it can make a difference.

Volunteers can also offer help by responding to simple requests. Recently a carer was concerned that their holiday would be detrimental to a neuro rehab patient by leaving him without visitors for a week. Staff soon rallied round to arrange visitors which included the assistance of a volunteer. Often a simple contribution can be of immense value to a service user and offer reassurance to a carer. Following this request we are looking to establish a small pool of participants from our reliable volunteers who may respond to similar 'one off' requests in addition to their usual roles.

At NTW we are privileged to work with our wonderful group of volunteers and are immensely grateful for their contribution. We hope to continue to strengthen and develop their involvement in response to the needs of Service Users, Carers and Staff.

Christine Lopez
Voluntary Services Manager





Looking to the future

CHAIRMAN

**Hugh Morgan
Williams OBE**

At our recent CQC inspection one of the questions I was asked was my view on the importance of carers and the Triangle of Care, and whether I thought NTW was sufficiently supporting the initiative.

I was pleased to respond that NTW was one of the first Foundation Trusts to recognise the importance of carers and their role is embedded in the governance of the Trust through their membership of the Council of Governors. Early on in my time as Chairman I hosted a visit from national representatives of carers who were impressed by how we involved carers in every aspect of their role.

Carers alert us when we get things right, and more importantly when we get it wrong. They are

on the front line and champions of service improvement and quality monitoring. Above all we recognise they are a crucial element in the recovery pathway of their loved ones.

We live in a time of austerity where every penny counts in the battle to ensure parity of esteem and dignity and respect for our service users. Carers play a vital role not only in caring but acting both as ambassadors and messengers for the core values of the Trust and what we all believe in.

I look forward to another year when we can celebrate with our carers the compassion and respect we aim to demonstrate to the people who quite literally depend on us.



Copies of the Annual Magazine can be downloaded from our website www.ntw.nhs.uk.

Please contact us to request a version in an alternative format.

If you have any feedback or suggestions on how we could improve our Annual Magazine, please do let us know by emailing communications@ntw.nhs.uk or calling 0191 213 0151.

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