

**Mental Health BME Grassroots event Feedback
14th November 2018**

Introduction

This follow on event was organised to build on the feedback, previously collated and themed from the first Mental Health BME Grassroots workshop to develop the ideas further. After presentations from Paulette Lewis (Lay Member Patient & Public Involvement) and Marlon Brown (Head of Integrated Mental Health Services) stakeholders worked in small groups, overseen by a facilitator, for thirty minutes. Participants came up with a variety of suggestions about how to improve the new model so it best meets the need of BME communities.

Participants were asked to discuss seven different themes. They were:

- Signposting
- Developing the team
- Partnership
- Raising awareness of mental health issues
- Supporting self-care
- Social Prescribing
- Quality Improvement

Below are the comments and recommendations made against each theme.

Signposting

- There is disparity between service users' expectations and professional practice. This can lead to inappropriate referrals
- Waiting times are too long
- There are examples of poor service user experiences
- Lack of support for carers – left to deal with the brunt of issues experienced by service users
- There is not enough support for carers
- Mental health services seem disjointed – this leads to confusion and difficulties with navigation

Signposting recommendations

- Develop a simple to use road map of services for common mental health conditions
- Train and support GPs to make the right referral first time to improve efficiency within the system
- If a referral is unsuitable the original referrer must be accountable for referring to a suitable service
- Train Home Coordinators to sign posters

- Promote a 24hr helpline – to reduce pressure on A&E departments
- Recruit and train Navigation Champions, similar to Personal Independence Coordinators to support service users with navigation
- Translate publicity material into other languages
- Develop the role of community hubs
- Link community hubs to GP practices for governance, assurance and safeguarding
- Use complaints and patient experience feedback to improve services
- Increase workforce to meet the demand for services
- Increase the level of support provided to carers to keep them well, financial, psychological and emotional
- Include carers in discussions about the person they care for

Developing the team - Recommendations

- Include service users in the recruitment process
- Get the buy in from GP's, practice managers and receptionists for social prescribing
- Appoint a volunteer mental health expert in each team who can act as a link between the community and professionals
- Include MDT service reviews, action plans, and patient choice in treatment plans
- Appoint navigators to provide ongoing support, e.g. substance misuse, housing and welfare benefits
- Provide funding to utilise community assets for non-clinical interventions

Partnerships

- The following points requires answers before a partnership is formed. Who defines the partnership structure and terms of reference?
- People must be realistic about what the partnership can achieve
- Partnerships must have strong leadership which embraces equality including the most diverse communities, community centred, accountable and outcome based

Partnership recommendations

- Identify gaps in service provision
- Get the buy in from providers to either adapt or provide alternative services if duplications have been identified from the analysis
- Create forum for partnership representation to the CCG
- Larger partners to lend their expertise, knowledge and resources to prevent the closure of smaller organisations
- Roll out mental health first aid training for all partners

Raising Awareness recommendations

- Start with research to develop key campaign messages to engage seldom heard and diverse communities, looking at stigma to challenge negative stereotypes

- Account for those who may not identify as a carer or someone with a mental health condition in campaign messages
- Campaigns need to be sustained and properly funded
- Utilise the voluntary and community sector's knowledge of communities and service user's experiences to design campaigns
- Recruit mental health ambassadors to increase the reach into diverse communities
- Align outreach engagement with regular workshops and seminars to assess impact

Supporting self-care recommendations

- Mobilise churches to actively engage individuals and encourage friendships
- Organise tea afternoons – organisations take turns to host afternoon tea
- Fund mobile gyms so the housebound can participate in gentle exercises
- Work with the Local Authority to provide more allotment spaces
- Utilise libraries - drop ins, advice and guidance, volunteer recruitment and job clubs
- Work with local businesses to donate self-care freebies and reduced offers services
- Intergenerational work - create opportunities for the younger population to support the elderly e.g. school's IT project, gardening
- Advocacy and volunteering – create a programme where retired individuals can give back to the community
- Mobile outreach – use an information bus to get information to the isolated about community offers
- Leaflet drops
- Promote friendships and peer to peer support.

Social Prescribing recommendations

- The term needs to be defined – a suggestion, the ability to access different hubs or community organisations to engage in various activities which may help me to keep well.
- Develop social prescribing in each GP network
- Work with Public Health to disseminate information about what is available in the borough
- Training - mental health first aid
- Publicising services available in the community
- Learning from each another and other organisations

Quality Improvement recommendations

- Cultural awareness/competence training for all professionals
- There needs to be equity between GP's and all partners.
- Training to ensure consistency in service delivery
- Considering the aspect of familiarity, the hubs should be staffed with individuals who reflect communities in Croydon. Creating an environment where people see others like themselves will help to develop trust