

**'Re-engaging in Life'  
Recovery-Focused Conference  
Friday 6<sup>th</sup> September 2013**

**PRIORY**

**Making links – Recovery approaches to  
reintegrating community and secure environments**

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## 3 main principles of recovery

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- **Agency** – developing a sense of personal control over and responsibility for one's life and illness, and gaining a belief in the future. Finding personal meaning – an identify which incorporates illness but retains a sense of personal control.
- **Opportunity** – ability to take up opportunities and build a life beyond illness. Using non-mental health agencies, informal supports and natural social networks to achieve integration and social inclusion.
- **Hope** – believing that there is hope, things can change and one can still pursue one's hopes and dreams, even with the continuing presence of illness. Not settling for less or for the reduced expectations of others.

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# Farmfield Hospital & Recovery

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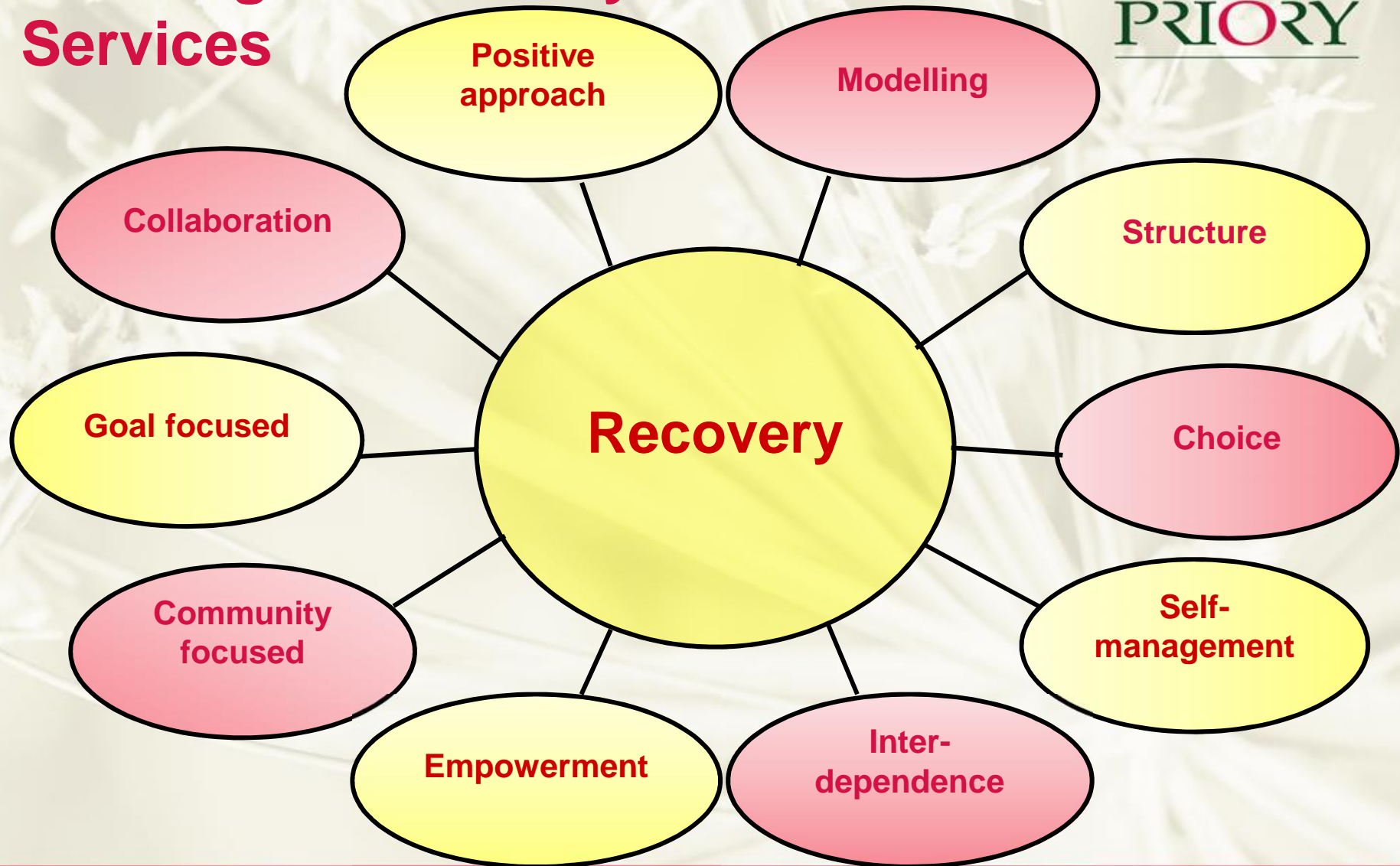
- 52 bed medium and low secure unit for male who have a criminal history and difficulties with mental health
- Recovery philosophy adopted because it works, but...
- ...‘hurdles’ in secure services where **agency**, **opportunity** and **hope** might be limited:-
  - Prejudices and multiple stigmas
  - Compulsory hospitalization and restriction of liberty
  - Tension between meeting clients’ wishes, meeting clients’ needs and protecting all
  - Recovery philosophy sometimes at odds with the organization’s aims, e.g. swift results and maximal risk reduction
  - Forensic clients are often cautious about sharing their thoughts and feelings – lack of trust between clients and mental health workers.

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# Meaningful Recovery in Secure Services

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# Service user's views

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## What recovery means to service users:-

- “Getting well, staying well and being able to tackle life without reverting back to old ways that did not work”
- “To get back to normal life by learning techniques to tackle everyday stress”
- “Getting well and keeping occupied; taking medication, keeping occupied and being able to handle things on my own. When I think about recovery I think about being more in control of my life”

## What service users told us they want - feedback from groups, themed months and the DREEM (2010-11) :-

- People from the community giving talks about their experiences
- Community links and community preparation work
- More visual information, videos and DVD's, including documentaries
- Sharing of experiences
- More information, learning and education support
- Ongoing input, more sessions, more depth and longer programmes
- Greater variety of education and work prospects, including vocational activities
- More communal and group activities

**RESPONDING TO  
USER  
FEEDBACK**

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# Community-Focused & Joined Up



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# Community coming in

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- Themed months, e.g. Beat Addictions, Recovery & Healthy Lifestyles Months
- Alcoholics Anonymous & Narcotics Anonymous
- The Samaritans
- MIND – Time to Change & The Hearing Voices Group
- South Downs Housing Association & The ‘Stay Up Late’ Project
- Carer’s Days & Support Groups
- Ex and community based service users
- DVD’s, recovery stories (documentaries, community based service users, celebrities) and film nights
- Camden Garden Centre
- Alpha
- The Richmond Fellowship
- National Open College Network
- Community Social Worker
- MAPPA
- Surrey Police Drugs Liaison Officer
- Surrey Harm Reduction Outreach Team (SHOT), SMART Groups, and RESPOND

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# Community coming in - Examples

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## Alcoholics Anonymous

- Community based AA members spoke during Beat Addictions Month 2011 – positive response from service users
- Liaison to set up monthly meetings, reflecting those in the community and key risk times
- 23 Meetings so far, 135 attendees (43 individuals, attending 1 to 12 times each)
- Service users now attending AA meetings in the community
- More service users wishing to set up peer support sessions within Recovery Month
- Greater completion of the Substance Use Treatment Programme (5 in 2009/10, 8 in 2011/12)
- Service users requests for Narcotics Anonymous meetings answered – meetings commenced 2013



## Camden Garden Centre

- Mike (employer) and Byron (employee) visited to speak during Recovery Month 2013
- Byron shared his experiences of coming out of secure services, seeking work and employed life
- Very honest advice and responses to service user questions from someone they related to – “he talked a lot of sense and gives us hope”
- Visited and advised upon a newly set up ward garden project

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# Preparation for the community

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- Risk assessing and managing, e.g. the Safety Planning Group
- Reps in meetings and committees
- Ward and hospital jobs, e.g. shop assistant, gardening, recruitment panel
- Vocational clinic drop-ins
- Literacy, numeracy, computer, and life skills education groups
- Charing CPA's, self reports and ward round self-report forms
- Service-user run peer education and support sessions, e.g. Bipolar Disorder awareness, coping strategies
- Own folders and diaries
- RISE, WRAP, Advanced Directives
- Self management , self help and practical information
- Recovery and shared pathway training and ownership
- Community mirroring activities, e.g. Themed charity events, themed sports events, physical health activities, 9-5 week day, peer support groups (Hearing Voices), social, spiritual and relaxing evening groups, ward community meetings, projects and socials, peer run competitions and quizzes
- Q&A discussion sessions with all disciplines, SMT and patient experts
- Tiered group work programme designed for varying needs

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# Preparing for the community - Examples

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## Safety Planning Group

- Developed at Farmfield and commenced in 2011
- 8 one hour sessions, educating on risk, assessment and planning for prevention. Responsive to learning styles (visual, auditory and kinaesthetic)
- 18 service users have completed the group so far
- One presented at a seminar asking professionals to set aside their fears of service user involvement – “to progress my recovery I need to know what to work on and what my strengths are”
- Evaluation ongoing but an increase observed in service user involvement and knowledge in risk assessment



## Education

- Approved Centre for the National Open College Network (NOCN)
- Various qualifications offered, including Diploma's and Entry Level Awards in Independent Living (household skills, personal care, accessing community facilities), Living in the Community, Looking after Yourself & Your Home, Maths, English (reading, speaking and writing), IT and Employability
- Weekly education groups focusing on functional skills – employment, life skills, computer, literacy and numeracy

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# Going out to the community



- East Surrey Eagles football team
- Voluntary and paid jobs (charities, shops, conservation)
- Monthly community day trips
- Community leisure activities, e.g. gym and fitness, swimming, bowling, cinema, rambling, museums, boot-camps
- End of group celebrations held in the community
- Service-user run peer education and support sessions, e.g. Bipolar, coping strategies
- Service-user presentations, e.g. risk assessment
- Service-user created films about recovery and tackling addiction
- Creating own relapse prevention plans in preparation for leave
- Meaningful unescorted and escorted leave (family, library, gym, work)
- Substance exposure work
- Alcoholics Anonymous community meetings
- College
- Spiritual centres
- Music festivals
- Self-catering and budgeting
- Community centres

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# Going out to the community - Examples

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## Football Team

- Joined East Surrey Eagles
- Competing in various games and tournaments, as well as weekly training in the community and the community football league
- Improving fitness and general wellbeing whilst developing new skills, team work and structure available in the community
- Integration into society and building links with others who cope with mental health difficulties in the community
- High demand to join the team and enhanced service user focus on healthy lifestyles in the hospital, connecting to personally meaningful activities that people take pride in



## Employment

- The Richmond Fellowship Employment Service ran sessions during Recovery Month and now have regular input
- Employment Group (5 service users, Richmond Fellowship and OT) developed the Service User Employment Project
- 3-tiered graded vocational programme developed – ward jobs (facilitating meetings, recycling, cleaning, gardening), hospital jobs (shop assistants, interview panel, meeting representatives, maintenance), community jobs (voluntary and paid)
- Regular drop-in vocational clinics to explore interests, discover vocational and educational opportunities in the hospital and the community, and gain support in CV development, etc.

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# Responses from service users:-

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- “Groups give you the knowledge to be able to deal with situations that come up and make you feel more confident.”
- “[Beat Addictions Month] Helps me to discover more about myself.”
- “The Safety Planning Group helps patients to think more about risks and be prepared to get involved in their risk assessments. It educates people so they can have insight.”
- “He [ex-service-user] talked a lot of sense and gives us hope.”
- “Dave Campbell’s [drug liaison officer] talk, very interesting and informative.”
- “People sharing their own experiences is very useful.”
- “Learning how to fill out C.V’s is good or more better than if I was to do it by myself.”
- “I didn’t doubt myself. I was positive and told myself ‘I am going to get this job’ and I have proved to myself that even though I have been in hospital for 10 years I can do it and I can still get a job!”
- “[The Employment Group] empowers us as a group and individuals to take control with slight support from staff to run fundraising events, projects and organisation of jobs within the hospital.”



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**Any questions?**

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