

# Healthy London Partnership UEC Masterclasses

March 2019 to July 2019

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# Background

We Can Talk utilises the experience and expertise of children, young people, hospital staff and mental health experts to improve mental health crisis support in acute hospital settings through training. We Can Talk is designed to support sustainable changes in practice, hospital culture, and in relationships between acute hospitals and Child and Adolescent Mental Health Services (CAMHS). The one-day training has been co-produced with young people with lived experience of mental health difficulties, hospital staff and mental health professionals.

Healthy London Partnership received funding to increase the awareness and promote the adoption of the We Can Talk project across London by offering a half-day workshop with the project team to each STP area.

These workshops occurred across London between March and July 2019 and were co-delivered by members of the We Can Talk team including young advisors with experience of presenting to hospital due to their mental health.

# Objectives

- Introduce the We Can Talk project and develop an understanding of the core educational competencies and current roll out model
- Learn how young people are involved in coproduction
- Understand the experiences of children and young people with mental health difficulties who present to acute hospital settings and the staff who support them
- Explore and understand the challenges and opportunities locally to address this area of provision

### North East London

### **Challenges:**

- Continuing the momentum without further support from the We Can Talk project team
- Engaging with hard to reach staff groups (medics, some senior management)
- Process issues including room bookings, protected time, valuing training over other mandatory requirements and winter pressures
- Identifying and paying young advisors moving forward plus training new project leads

### **Opportunities**

- NEL STP has formalised attending the training in their contracts with acute providers this provides extra motivation for engagement
- Recent CQC inspection highlighted We Can Talk as an area of outstanding practice at Barts Health NHS trust
- Creating bank of staff to 1:1 young people, decreasing reliance on RMNs, improving pathways
- Identifying training ambassadors across staff groups, looking at materials to explain to staff why it should be important to them (attending the training)

#### **Next Steps:**

 Following the workshop NEL STP agreed to establish a steering group to oversee continued adoption of the project

### North Central London

### **Challenges:**

- Releasing staff and continuity of integrating the project after the first year
- Identifying and paying young advisors post project team involvement
- People who resist change, not seeing the benefits
- Projection of time for staff to engage in the project
- Admin, coordinating dates, rooms and publicity
- Engagement and getting staff signed across all levels

### **Opportunities**

- Opportunity to create a positive change in culture towards children and young people
- Increased confidence of staff and empowering them to create change
- Wide management buy-in
- Further evaluation, looking at patient experience data and audit of risk incidents
- Development role for lower banded staff

#### **Next Steps:**

- NCL with local STP and national HEE funding is expanding We Can Talk across all the hospitals in their geography in 2019/2020.
- NCL STP will establish a steering group to oversee progress against goals

### South East London

### **Challenges:**

- Uncertainty of staff about how to use their existing skills to support children and young people who attend for their mental health
- Lack of networking between hospitals and CAMHS
- Lack of collaborate working between CAMHS, hospitals and schools
- Health professionals do not see ED as the right place for patients with mental health problems
- RMNs and the high cost and frequent poor quality of care
- Lack of mental health training

### **Opportunities**

- Improve the support offered to young people when they come to hospital for their mental health
- Seek ways to build capacity internally to provide one-to-one support when required, rather than using external agency staff.
- Share practice across hospital sites and with CAMHS. There were examples of good practice, for example, Lewisham have developed a self harm information pack to be discussed with young people before they are discharged.

#### **Next Steps:**

 Attendees will look to engage with those who did not attend to see if there is enough support locally to develop a bid.

### South West London

### **Challenges:**

- The practice of some RMNs does not seem to provide effective care for children and young people.
- Children and young people are often made to stay in A+E until a 1-1 can be found.
- Not knowing where to signpost young people or parents for further advice or information
- Lack of resources to support the clinical decision-making of paediatric consultants e.g.
   on whether it is safe to discharge a young person home

### **Opportunities**

- There was overwhelming recognition of the need for more mental health training for hospital staff. All present highlighted poor experiences and high costs of the use of RMNs and the lack of confidence of their ED and ward staff.
- Review and change policies for 1-1 support for children and young people to skill up and use staff who are more skilled at working with children e.g. HCAs
- Identify information to signpost young people and parents to
- Standardised protocols about admission and 1-1 support
- Develop a way to share information and practice between A+E teams

#### **Next Steps:**

- Continue to raise awareness about the We Can Talk project locally and identify other sites who are keen to be involved.

### North West London

### **Challenges:**

- Increased numbers of children and young people presenting in mental health crisis
- Lots of young people managed in acute hospital settings with eating disorders (inpatient eating disorders unit nearby)
- Engagement across the STP (key colleagues not at workshop)
- Barriers to local CAMHS involvement, how to release time for project leads
- Sustainability (post funding)

### **Opportunities**

- Excited to engage with a wide range of stakeholders (across multiple staff groups, also with local CYP and parents/carers)
- Huge need and training would be popular with staff
- Joint project across organisations
- Looking at additional audit and quality assurance data to document wider impact
- Create something sustainable, look at what levers (CCG/STP/etc) can ensure this

#### **Next Steps:**

 Plan to engage with those not present from other acute and mental health trusts and look if there is a local meeting or forum that this project discussion could be brought to.

## Workshop schedule

North East London – 4 March 2019

North Central London – 5 March 2019

South East London – 13 May 2019

South West London – 24 June 2019

North West London – 5 July 2019

### Contact

To arrange a time to speak with the team about joining the next phase of We Can Talk please e-mail:

future@wecantalk.online

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For more information please visit:

www.wecantalk.online/

Twitter: @WeCanTalkCYPMH #WeCanTalk

# Principles

All children and young people who attend hospital have emotional and mental health needs and some attend specifically due to concerns about their mental health.

After looking at the research and speaking with children and young people and mental health professionals we agreed there were key areas that all staff should be able to understand and support in relation to children and young people's mental health.

Most importantly, we heard that children and young people want us to talk to them about their mental health and not ignore the elephant in the room.

We want to let you know that We Can Talk about a lot of different things. So we wrote a list.

# Principles

We Can Talk and listen about your emotional and mental health needs in a clear and non-judgmental way

We Can Talk about how we will look after your physical **and** emotional needs while in hospital

We Can Talk about how to help manage the challenges of being in hospital by using distraction and relaxation techniques

We Can Talk about your problems and we can try to find the right person to help

We Can Talk about how to keep you safe while you are staying with us in hospital

# Principles

We Can Talk or we can communicate in another ways that might work better for you, by writing, drawing, using signs and pictures etc. We're flexible.

We Can Talk about self harm and other big issues that might be worrying you

We Can Talk in private and will always talk with you about information that needs to be shared.

We Can Talk about difficult or awkward subjects in a way that is not as difficult or awkward as either of us thought it would be

We Can Talk to you and your parents / carers about helpful places to access additional support or information around your mental health



# Co-produced children and young people's mental health training for hospital staff

Change the Future