

CONNECTED

Winter edition 2017

Innovative

Value added creativity



Branch on Board
One year on

Support Staff
Giving something back

Arts therapy
A contemporary twist

Implementing new processes, methods and models is second nature to many of our staff who have truly embraced the KMPT value - innovative.

Innovations can be incremental or radical - where entirely new ways of operating are introduced. The features in this edition of Connected focus on how staff have used innovative ways to enhance or improve our services. Creativity, or the conception of something original or unusual, has also played a huge part in our service development and we are all #KMPTProud of our successes!

If you've got any feedback on any of the features in this edition of Connected or on any of the previous editions, please don't hesitate to contact us: communications@kmpt.nhs.uk

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Recruiting the right people who have the passion to help us reach 'Outstanding'

KMPT Director of Workforce and Development, Sandra Goatley

WELCOME

When the CQC rated us earlier this year as 'Good' overall, they commented particularly on how creative and positive we are as an organisation. The Chair of our inspection, Dr Geraldine Strathdee, commented at our Quality Summit in May, that she could see that KMPT is a trust where a thousand flowers bloom. We think she's right. One example of that creative, entrepreneurial spirit is featured in this edition on page four. It was a glorious performance of music and theatre created by people who use our services and performed on a lovely summer's evening on a cruiseboat on the Thames. Entitled Cantata, it was a celebration of the anniversary of the first performance of Handel's Water Music three hundred years ago and to describe it as uplifting and inspiring doesn't do the experience justice. The pictures give you a taste of what the evening included but the striking thing was the energy, enthusiasm and talent of all those involved.

The people we meet every day, whether they use our services or work in the trust, are an absolute inspiration for so many reasons. It's that inspiration, innovation and creative spirit that makes KMPT such a truly exciting place to work.

We all have a part to play in bringing innovation to KMPT, whether helping us as a patient, carer, working on the front line or supporting services. To achieve true innovation we need to work across boundaries to deliver excellent person centered care.

There are of course some great examples of this already happening with our street triage pilot and delivering joint mental health awareness training with both Kent and Essex Police.

Within the trust, teams have worked together to ensure we are recruiting the right people who have the passion to help us reach

'Outstanding'. Take a look at the back page to see our latest advert with a picture of Molly, our Pets as Therapy dog. Our Workforce team have also helped Darent House recreate their garden as therapeutic space for patients and staff, take a look at the results on page 12.

All these things will make a positive difference. So be the one that makes that difference. It doesn't matter whether the innovation is small or large, it's the difference it makes that matters.

As Gandhi said 'Be the change you want to see in the world'.

Sandra Goatley
 Director of Workforce and Development

CREATIVITY THROUGH THE ARTS

It was the performance of a lifetime for some, and for others perhaps just the beginning, when KMPT service users took to the stage aboard a Thames cruise ship one mid-summer evening.

The occasion? – A Cantata organised by the charity Beats Learning. The purpose? - to commemorate the 300th anniversary of Handel performing Water Music on the Thames for a river party held for King George and to provide a therapeutic outlet for service users.

It all came about after the Dartford, Gravesend and Swanley (DGS) community mental health team received a phone call in November last year from Beats Learning. Clinical Lead Nurse, Heidi Coburn, heard how the charity had organised an event in the north of England where service users had come together to showcase their creativity through the arts. They explained that their purpose is to help people at risk of social exclusion to achieve a qualification in music or the performing arts and that they wanted to replicate the northern event in the south. Heidi thought this was a great idea and contacted service users that she knew had an interest in music, acting and poetry. A small group, ages ranging from 18 to 65, started to meet on a weekly basis to work together and use their individual talents to create an eclectic performance. As the event approached, there were two workshops for the seven KMPT service users who had enrolled as

students at Hackney College. The learning experience had ongoing benefits for some of the group as one is now full-time at the college and learning more about music production, whilst another is due to start university.

Heidi said: “The tickets sold out very quickly and what stood out was the electric atmosphere of the night. Everyone seemed happy and people were dancing, talking and were very proud of their input to the event. There were so many benefits for the service users taking part in the project and production. Mental health improved, confidence grew, and their talents and strengths shone and the social aspect was fantastic with many new friendships made. I’ve watched these people grow as they prepared for the event and, as they performed. They worked so hard and showed a commitment every week, you could see the pride in what they were doing. We are now looking at what we can do next and will be meeting in September.”

The group were thrilled that KMPT’s Chief Executive, Helen Greatorex, came along to watch the performance as it made them feel valued and special.

Chief Executive, Helen Greatorex said: “I was delighted when Heidi invited me to join the cruise and thought it sounded lovely. It turned out to be so much more than just lovely. It was an extraordinarily special and memorable evening of celebration, reflection and

creative energy studied by the most wonderful performances. To have gone from a standing start last Christmas to having written, rehearsed and now performed in London is exceptional, we should be extremely #KMPTProud of our team, for a truly impressive accomplishment.”

One of the seven performers was Colin Higgins who at the age of 63 has been playing rhythm guitar for over 55 years. Colin has bipolar and explained that music is extremely therapeutic. He said: “Ricky Havens set the Woodstock festival on fire in the late 60’s and my aim was to be as good as he was and do 20 strums to a bar! What I play now is a bit like Ed Sheeran’s music blending hip hop, folk and other elements together.

“It was very exciting to take part in the Cantata. It made me have a sense of purpose. I haven’t done anything since but would like to because, for me, music is therapy. Working as a team was great, I felt valued.”

“Mental health improved, confidence grew, and their talents and strengths shone.”



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“We have got many hugely motivated senior staff all pulling in the right direction and it is good to feel part of that.”



ON BOARD WITH VENU BRANCH

A refreshingly alternative view is what the KMPT Board has come to expect from Venu Branch who joined the trust just over a year ago as a non-executive director (NED). Venu is keen to champion innovative initiatives and is quick to commend the work of staff whose creativity has resulted in better ways of working.

What was it like joining the KMPT Board?

“As a new NED with a background outside the health service I was given an excellent briefing by the Chairman and from my Board Mentor, Deputy Chair, Anne-Marie Dean. I felt that I could ask anything. I arrived at a good time because it was around the same time as new, senior staff. This was a good opportunity to work alongside them and learn about the trust. Very soon into my appointment we learnt that we had to prepare for a Care Quality Commission inspection so I had to bring myself up to speed quickly. As well as needing to understand the vision and values of the trust I also needed to know about the premises. There is a large estate with some really wonderful elements. The Fant Oast house, KMPT’s inpatient detox facility, is exceptional and the ambiance and ethos is supportive and caring. It is a truly benign environment. Also Newhaven Lodge, a mixed gender inpatient adult mental health rehabilitation unit - again a human-scale space. As well as going to the various sites, I also went to see the trust’s Communications Director speak (and listen to views) in Tenterden at one of the Listen Up! events. It was good to hear what people want to know about KMPT, how they can help and learn about

how we at the trust can use these public opportunities.

“As well as experiencing all the positive practice during my first couple of months in post I also got a sense of the challenges; such as recruitment. We want staff to be proud to work for KMPT so there needs to be a constant signalling of ambition and a good indication of the type of career opportunities that we can offer. We have work to do in our community mental health services and it is important that the NEDs get about and see how the staff are working and hear how people expect to be treated.”

What do you feel you can bring to KMPT?

“I feel that I can bring so much to the Board! I’m a good listener and my skill set is around policy, organisational development and culture, so I am well placed on the Workforce and Organisational Development Committee. We have got many hugely motivated senior staff all pulling in the right direction and it is good to feel part of that. I am willing to try new ideas, ask questions and challenge as often a new perspective can unlock potential. We need to look at the way we do things in terms of efficiencies and effectiveness and it is good to see staff being responsive. Also I have lived locally, my family is from Medway, so I know part of the KMPT patch well.

“I’ve got a very good memory and I’m perceptive so I pick up when someone says something that doesn’t ring true. I love to be out and about and talking to people and feel that I am very approachable, which is important in

my role as the NED responsible for whistleblowing. It is also important to be sensitive to diversity. In due course I hope I can make a big contribution to the mental health community that looks at disproportionate liberty. I am open to learning and the whole experience has been a learning journey.

“My own work takes me all over the world and I am always mindful of bringing what I have learnt back so that I can make a difference in the local community.

“I am very pleased that the KMPT Board has good diversity. I recently attended a development day for NEDs where there was a lot of talk about equality and diversity. KMPT is on a journey and I hope, from an educational point of view, our journey could be powerful learning for others in the NHS.”

What should be our future focus?

“There are many improvement plans across different departments; however we need to think about our organisation as an ecology and within a wider regional and national ecology. NEDs need to identify with the senior team how we can maximise that view so that we can improve to become outstanding. We need to look at the organisation on a day-to-day basis to understand what it feels like and what the culture is like. But as NEDs we need to resist having a laser focus, that is for the senior executive staff, we can take a more holistic approach and look at the bigger picture.”

THE POWER OF LISTENING

Listening to patients' stories is a powerful medicine and as a result of listening to just one patient, the trust has become more deaf aware and improved the experience for service users living with hearing loss.

More than 11 million people in the UK or one in six of us have some form of hearing impairment.

Lorraine Campbell from Deal is a deaf service user who has bravely turned a negative experience into a positive one that is already benefiting staff and patients. She candidly explained the challenges she faced first-hand as an inpatient with the trust: "In 2005 I started losing my hearing and I've worn hearing aids since 2008. I suffer from tinnitus and Ménière's disease, which is a long term, progressive condition affecting the balance and hearing parts of the inner ear.

"As a deaf patient with the trust I felt under supported with a range of things, from not having any subtitling on the television to a lack of equipment at tribunal hearings.

"In hospital I wasn't able to obtain medication for a long term itching in the ear due to fungal infections (otomycosis) and found it difficult to get new batteries for my hearing aids. These experiences were traumatic and made me feel more socially isolated."

When Lorraine returned home she was determined to use her experiences to help improve the patient experience for deaf service users. Lorraine met with Chief

Executive Helen Greatorex at a Mental Health Round Table event arranged by Charlie Elphicke MP where she openly talked about what had happened to her. Lorraine subsequently organised a 'listening event' in Deal with around 25 service users and senior management and has also presented at the trust's Equality and Diversity Steering Group.

As a result of listening to Lorraine, the Community Care Group's Dover and Deal Community Mental Health Team (CMHSOP) for Older People purchased new equipment including 10 Sonidos or digital listeners and a 'Roger pen' which enhances sound in a group setting.

Brenda Allerton, Community Psychiatric Nurse at Coleman House, Dover worked alongside Lorraine to oversee the new equipment and said: "We've definitely become more deaf aware as a result of working with Lorraine and the new equipment is very useful with both group work and individual interviews. It's benefiting young people with hearing loss, as well as the elderly."

Lorraine is working with other trust staff including Equality and Diversity Manager, Audrey Quansah Abakah, on the Accessible Information Standard where they relate to a disability, impairment or sensory loss for people with disabilities. Audrey said: "Lorraine's personal experience of hearing loss has been invaluable to the trust. She has acted as a critical friend and 'mystery shopper' on



A national charity since 1911

the experiences of deaf patients and service users. She has advised and assisted the trust in purchasing additional equipment for different settings. We will continue to work with Lorraine as we aspire to achieve Disability Confident status."

Lorraine is also a passionate volunteer campaigner with the national charity, Action on Hearing Loss. The charity's 'communication card' has been cascaded to staff which highlights different reasons why a patient suffers sensory loss and empowers staff to provide better personalised care.

One simple act of actively listening to a service user has delivered positive changes and is one of the reasons why the trust was rated 'Outstanding' for caring by the CQC in April 2017.

For information on how to be more deaf aware visit www.actiononhearingloss.org.uk.

“We’ve definitely become more ‘deaf aware’ as a result of working with Lorraine and the new equipment is very useful with both group work and individual interviews.”



Lorraine demonstrating essential equipment

SPREADING A LITTLE HAPPINESS

Armed with an endless supply of tissues, having a willingness to listen, offering a shoulder to cry on as well as providing great partnership working, the recently expanded Mother and Infant Mental Health team is set to reach more mums concerned about their mental health than ever before.

Bonnie King is a Perinatal Clinical Nurse Specialist. She has worked with the MIMHS team helping mums and their families for eight years. It was over a year ago that Bonnie and her team started working with Medway NHS Foundation Trust (MFT) to find a way of offering face to face contact

with pregnant women who may have a mental health concern. Now a strengthened partnership has formed and Medway has, for the first time, a mental health professional based within its hospital maternity services.

The end of August marks three months into the six month pilot during which Bonnie has been based within the Obstetrics and Maternity unit at Medway Maritime Hospital (MMH). Before making MMH her second home, she set about making important contacts with local support systems in place. "Quite often it's just about signposting. I've made those

connections and can refer or make appointments while I'm sat with the patient. I'm making sure they are referred to where they need to be."

Now every Tuesday Bonnie is available to see pregnant mums across Medway and Swale who may have a mental health concern. "Patients are asked by their midwife 'Is there anything you're worried about?' This simple question may be a catalyst to identifying an urgent problem that needs addressing quickly. Or it could be that someone just feels able to finally talk about a concern. We've seen a range of questions from mums, some who already have a mental health



health conditions think that the moment they fall pregnant, they need to come off their medication. In some instances this can be very dangerous to mum and baby. Some medication can still be taken during pregnancy, others you have to steer clear of. It's important that patients have all the facts to make their own decisions."

Of course this couldn't have happened without MFT understanding the vital need for this service to be more accessible. Miss Watson, Obstetric Consultant, had become increasingly concerned about the number of antenatal patients who had mental health concerns who found it difficult to find pregnancy-specific advice for their mental health, and often their medication too.

"I am delighted that Bonnie is able to see patients within my clinic. Our community midwives and local GPs

can now feel confident that the patients really are getting the best advice", she said.

"This clinic is designed to keep mums and babies healthy throughout pregnancy and after delivery, and any antenatal patients who have a significant mental health problem can now feel assured that they will be seen promptly by the right health care professionals."

Within three months the team has already seen over 50 mums. They'll feedback to Kent's Clinical Commissioning Groups to see where they go from here and with the hope the service will spread across the county.

Regardless, with tear stained shoulders the team will go on with one goal, it's all about mum and baby.














condition and have some worries about medication. Regardless of the question they have, we're here to help."

Despite a huge rise in people talking openly about mental health, there unfortunately still remains a stigma attached to it. Combined with mums wanting to do the very best for their unborn child, pregnancy can be an incredibly stressful time. "Being based alongside maternity services means speaking with us can be as routine as having a check by the midwife. You're attending your obstetrics appointment – I just so happen to be there if you need me."

Throughout the process one factor is vital for Bonnie - to ensure women are making fully informed decisions about their healthcare. "Women speak to us for a number of different reasons. For example, some people with existing mental

Little bags of happiness are given to mums with severe anxiety. The contents can be used in a number of ways as and when they need them.

-  A plaster to heal you when you hurt
-  Love heart so you know someone loves you
-  String to hold it together in tough times
-  Rubber to erase those little mistakes you make
-  Diamond to bring a sparkle to your eye
-  A marble for when you start losing yours
-  Lucky bean so you always have luck on your side
-  Coin so you are never completely broke
-  Star to wish all your wishes upon
-  Paperclip so you are always organised
-  Kiss for when you are feeling down

GIVING SOMETHING BACK

It's not just the day job that keeps our support service staff busy, some teams have been working above and beyond to improve our staff and patient experience.

In June this year patients and staff were left devastated when the garden area at the back of Darent House in Sevenoaks was vandalised. Director of Workforce and Organisational Development and Freedom to Speak Up Guardian (FTSUG), Sandra Goatley, heard all about it when she visited the teams as part of a Big Conversation on the Road event and decided to spring into action to get the garden blossoming back to its former glory. She enlisted the help from her team and together they transformed the garden into an oasis of calm and tranquility by removing the

damaged furniture, debris, rubbish and general tidying up. Discounts from local stores, including Homebase, were gratefully received as was the free compost paid for by a member of staff on the till at the Sevenoaks Garden Centre!

Patients and staff now have a beautiful picnic area where they can enjoy their lunch in the sunshine and make full use of the new garden furniture. The gardening efforts of the workforce team have been thoroughly appreciated by staff at Darent House who sent Sandra photographs showing how they are tending to their lovely new garden. Secretaries, Janet Dean and Jan Hockey who work at Darent House are continuing to look after the garden one night a week and the Police Community

Support Officer called in to introduce Lorraine Sylvester who is the Anti-Social Behaviour worker at Sevenoaks District Council. Janet and Jan put her in touch with KMPT's Specialist Care Group Manager, Rose Waters, and through Lorraine, Rose met the Council's Community Payback Team who said that they may be able to bring ex-offenders in (under supervision) to load a skip so that rubbish can be removed from the garden. Lorraine's husband, who works for Kent Fire UK, has already offered to pay for the cost of the skip.

The garden tidy-up has become a real community effort – thanks to the initial efforts of Sandra and her team.



When the Communications team heard that Woodchurch Ward at Thanet Mental Health Unit was in desperate need of refurbishment, they decided to raise some cash to kick start improvements. They decided to walk the circumference

of Bewl Water, a cool 12.5 miles, to raise money through sponsorship for the ward.

Aching legs, a few blisters and a rain storm didn't quell the team's enthusiasm and creativity and they

are now pledging to continue to fund-raising for refurbishment by rolling out a series of sponsored events throughout the year ending on the 70th birthday of the NHS on 5 July 2018. Watch this space!

“

Sandra decided to spring into action to get the garden blossoming back to its former glory.”





“I’m looking forward to developing this role and really taking it forward with the research team.”

REACHING OUT WITH RESEARCH

Tom Coppins was diagnosed with vascular dementia at the young age of 57. He lives with his wife Pauline and together they have six wonderful children. He has always been on the go and there is no sign of that changing. In fact, Tom’s experience has been positively life changing.

It was Pauline that noticed some significant changes with Tom’s short term memory and urged him to go to his local GP. After a series of tests he was referred to a memory clinic and received the news he has vascular dementia. That was eight years ago. A great deal has happened since then and Tom and his wife have transformed his experience into pure positive energy.

Tom’s aim is now to help others. He is a mentor, a member of the Alzheimer’s Society, a founding member of Memorybilia and has recently taken on the role of a Patient Research Ambassador (PRA).

“At the time I was diagnosed, there was little support available. I had my family around me but I needed to speak to someone who understood what I was going through and could explain things to me. I was invited to attend a new Peer Support Group with the Alzheimer’s Society and really wasn’t sure it was for me. On the way to my first meeting, I sat in a layby trying to decide if I should go in when a car pulled up behind me. I pulled myself together, drove to the venue and went into the group. I shared my feelings with everyone there and a voice piped up ‘I felt the same - that was me in the car behind you’. It was all I needed to feel reassured that this was the right place for me.”

Tom has always been an outgoing person. He runs his own transport business for years and supported a number of staff. It’s clear that there was no way this diagnosis would keep him down.

“After I attended a few of the Alzheimer’s Society groups, I approached one of the nurses at the trusts memory clinic I had attended and asked if I could speak to newly diagnosed patients to try to help. I didn’t want someone to be in the same situation I had been in.”

Tom now regularly attends post diagnostic courses held by the trust and talks to newly diagnosed patients as a mentor. His experience and journey since being diagnosed is inspiring to most but to someone who is concerned about their future with dementia, it’s a lifeline.

There isn’t a presenter on television he hasn’t met, a newspaper he hasn’t been in and he has even taken on the television interviewer role for himself by questioning the Chief Executive of the Alzheimer’s Society and the Head of Research at the University College London. Of course not forgetting he also attended the G8 summit!

It was while visiting the University College London’s vast research department that sparked another interest for Tom. He enrolled into a two year study; Living well and enhancing active life - IDEAL. IDEAL is led by the Research in Ageing and Cognitive Health (REACH) group based at the University of Exeter. It is hoped the study will help to identify what changes could be made by individuals, families and communities to enable people to live well with dementia but also looks at what makes it difficult to live well in this situation.

On the back of this project he has also signed up to Join Dementia Research (JDR). JDR is a service which allows people to register their interest in taking part in dementia research and be matched to suitable studies. Everybody now has that chance to see what dementia research is taking place, both in their local area and across the nation. The service delivers new opportunities for people to play

their part in beating dementia; connecting researchers with people who want to participate in studies.

Tom was then approached by the trust’s research team who asked him if he would be interested in becoming a Patient Research Ambassador. PRA’s are patients or carers with a passion for research. They want to help other patients to have better informed choices about participating in research through their local NHS. Tom jumped at the chance and has already been encouraging others to get involved in research while attending the myriad of groups and societies he’s enrolled in. “I’m looking forward to developing this role and really taking it forward with the research team. We’re going to get together when I’m back from my latest holiday to see how we can open up research to more people.”

Tom’s wife Pauline accompanies him everywhere. Speaking with her about his new role she said “He

has a unique gift of making people laugh. It helps that as a family we try not to take things too seriously. If we did, things might be very different.”

While it’s his journey that helps others, he feels that Pauline is the hero and has helped change his diagnosis into an opportunity. “If it wasn’t for her I wouldn’t be able to do all this. She is my lifeline.”

While Tom is always on the go in his new venture he can’t leave the travelling bug behind and makes sure he and Pauline take some time for themselves with plenty of holidays to make even more of those precious memories.

Interested in becoming a Research Ambassador, visit <https://www.nihr.ac.uk/patients-and-public/how-to-join-in/patient-research-ambassadors/>

RESEARCH = RESULTS

To trust staff and students, research is a vital part of their work. To some patients, it may seem too tall a mountain to climb while coming to terms with a diagnosis. However, times are changing and we are delighted to see more and more patients taking part in research studies. If you like facts and figures, there are statistics to prove it! The trust has taken part in more studies than ever with participation figures rising by 46% while the number of those being recruited to take part in studies has grown a whopping 99%! Another way of looking at it is the team had a recruitment target of 410 recruits to studies in 2016/17. They achieved 828 – 202% of their target! This year we are hoping for 1000 individuals to take part in research!

These amazing achievements could not have been possible without the continued hard work and dedication of the research team, but also the ever increasing number of staff becoming involved in research or encouraging patients to become involved. Although, you don't have to be a patient to get involved. Some more recent studies are encouraging our own staff to take part, like the MindShine3 study that is looking at interventions to improve wellbeing and reduce stress among NHS staff.

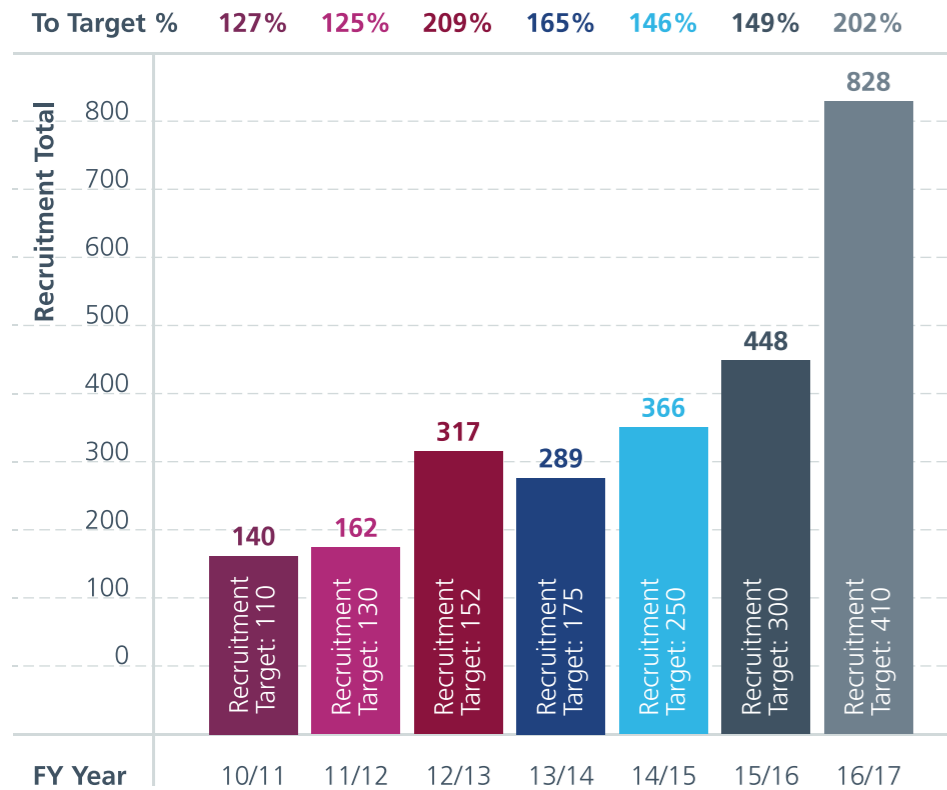
Our research team is funded by the National Institute for Health and Research (NIHR) and work as part of the Clinical Research Network, Kent, Surrey and Sussex. The team help provide patients, staff and carers with the opportunity to take

part in exciting new research in many different ways. Whether it be by testing out the new drugs and novel interventions, referring interested individuals, or acting as a Principal Investigator – anyone can get involved and involvement is increasing. Nationally the number of people recruited to research in 2016/17 reached more than 665,000*. 35,528 participants across Kent, Surrey and Sussex were given access to new treatments by being recruited into clinical research studies. The NHIR has seen more than 3.1 million participants get involved in research over the last five years.

Our research team has gone from strength to strength. The team has doubled in size to accommodate for the increase in research studies and they have recently moved into their very own dedicated Research Centre in Maidstone. The building is nestled in the Oakwood site opposite Priority House but their research activities have them buzzing across the county. We know research is important. Just look at the developments it has made over the years with vaccines and improved treatments across all areas of healthcare. It's wonderful to see so many people, staff and patients, getting involved to improve healthcare for generations to come.

To see current studies within the trust, visit <https://www.kmpt.nhs.uk/research-and-innovation/research-and-development.htm>

*Figures published by the National Institute for Health Research (NIHR)





“My motto now is - I have mental health problems, but that doesn't mean my life has to stop.”

Daniel teaching a cookery class at the Umbrella Centre in Canterbury

USING MY DIAGNOSIS TO HELP OTHERS

We talked to 27 year old Daniel Pullen about his involvement in research, how it all began and how it's helped his mental health journey.

Daniel has schizoaffective disorder. What does that mean? Well the official explanation is that a person experiences a combination of schizophrenia symptoms, such as hallucinations or delusions, and mood disorder symptoms, such as depression or mania. For Daniel it means he has bipolar and psychosis. He hears voices and has severe highs and lows. It's been tough and medication hasn't always been easy. It was at a time when he was suffering badly from the side effects of Aripiprazole that he decided to stop taking the medication. He became severely unwell and was admitted as an inpatient. Daniel was adamant he wasn't going back on the medication and a psychiatrist on shift that day suggested Daniel consider taking part in a new clinical trial being delivered by the trust's clinical research team.

The trial Daniel was introduced to was the European Long-acting Antipsychotics in Schizophrenia Trial (EULAST). The EULAST trial is a large European scientific study, sponsored by EudraCT. The study aims to compare discontinuation rates in patients with schizophrenia randomized to either Aripiprazole or Paliperidone oral or depot formulations over 18 months.

Daniel was randomly allocated to receive Paliperidone Depot. He explained "I was given a while to think about it and agreed. The trial means that I'm given a depot injection of a particular drug. This means it's a slow-release, slow-acting form of medication. While having the medication

administered, I receive regular physical checks including blood tests. I also answer a range of questions for the research team so they can check on side effects and how it's impacting on my health. At first because of my paranoia I thought they were harming me but I was comfortable enough to talk it through with the team and they were great. They clearly love their jobs and it made the process so much easier."

Summarising his feelings about the trial Daniel said: "I feel like I've won a £1m and I'm spending it, although it will soon run out as the trial ends."

The additional support the trial offered to Daniel has been invaluable and he's worried that when this goes at the end of the trial, he'll be back to step one. Daniel is due to end his involvement in the study in four months' time (Jan 2018) but he is making sure he's sharing his concerns with the research team and his clinical team, which will help with the transition. Both teams have worked very closely throughout Daniel's involvement in the trial to ensure continuity of care at all times. He's made great strides in understanding his medication and talks knowledgeably about what's available and the impact it has on him. This is important going forward so he can be confident that the medication is working for him and not against him. He is also less likely to stop taking it as he has done previously - with disastrous consequences.

Daniel is doing all he can to keep well. He volunteers at the British Heart Foundation, with the Friends of Westgate Parks (an agricultural garden) where he does general

gardening and dabbles in river monitoring and is part of the Buddy scheme. He loves socialising with his friends and enjoys living in Canterbury where everything he needs is so close by. Talking to Daniel it's clear he is a hub of energy and very determined: "I'm starting to retake some of my GCSEs soon so I can get a part time job and then take driving lessons. I'm really keen to work for the trust. We'll see what happens once I've passed my exams - which I know I'll do!"

As a young adult Daniel's relationship with his parents was strained, mostly due to his ill health. Now they've rebuilt their relationship and he's supported by his family and friends. "I'm so proud of my sisters and brother, they've all worked really hard. I'm excited to be an usher at my sister's wedding soon although part of me is a little worried because I have panic attacks. I'm going to keep reminding myself that all eyes are on the bride!"

Watching how confident he is talking about his next steps, it's hard to imagine how he's struggled with his mental health. But that's the problem with mental ill health; it can completely change a person. "When I'm ill I can lash out and be violent, it's not me. I can also get really paranoid and when I was hearing voices I would think people were saying things about me.

"My motto now is - I have mental health problems, but that doesn't mean my life has to stop."

The medication is helping and he feels so very lucky to have been part of the clinical research trial. I think we were lucky to find him.

A CONTEMPORARY TWIST TO MENTAL HEALTH

The positive use of art in mental health has been visible across the years. Many use it as a coping technique or a form of release to help deal with their ill health. Others tragically use it as a front to hide the internal battles they are facing.

Since 2015 we have embedded the use of the arts within occupational therapy across KMPT and have rolled out therapeutic staffing across Kent and Medway. We firmly believe that occupational therapies help our patients immensely. Some former patients have even gone on to make it their career and have gone from patient to staff as they rejoin us as occupational therapists or nurses.

One of our Occupational Therapists has taken it a little further and with the help from one of the country's leading art galleries, she has developed a project that she hopes will leave a legacy.

Jemma Channing, has both a deep seated love for the arts and working in the community. It was while volunteering at the Turner Contemporary she came across a unique way of combining her work with mental health and the other passions in her life.

"I could see a fantastic opportunity before me and thankfully everyone came together to support it."

Jemma and Trish Scott, Research Curator at the Turner Contemporary, applied for funding for the project from Live Well Kent which has been put towards securing an artist to help develop the

project. "Our project lead artist, Tess Denman-Cleaver, specialises in making performance based art, from immersive multimedia installations in galleries, outdoors and in non-traditional spaces, to live performances and theatrical productions. We had some amazing candidates but we're delighted Tess has joined us."

Patients and former patients joined the duo at a series of workshops looking at the TS Eliot poem "He Do The Police in Different Voices" also known as "The Waste Land". It is believed to have been written while Eliot was convalescing in Margate in 1921.

At the workshops, the volunteers considered what the poem meant to them. Everything that comes from the sessions will now be fed into the creation of performance-based artworks which will be part of the Journeys with the Waste Land exhibition at the gallery next year.

Each workshop supported the volunteers to consider what the poem means to them and to also discuss how it resonates with their experience of Margate today. Over ten workshops, the group explored the poem through sound, visual material, walking, text, movement and performance.

Jemma said "As an Occupational Therapist I have really enjoyed this project as a key part of my role is promoting independence and engaging individuals in occupations and activities that are meaningful to them."

The project is not just raising awareness of mental health, it has given patients an opportunity to get more involved with their community, to socialise and spend time with other people, making new friends.

"The process has also enabled our service users to take part in activities they might not have done before, access community venues they might not have known about and built their confidence in trying new things and going to new places."

Part of the funding will also be used to allow gallery staff to undertake mental health awareness training which incorporates the therapeutic benefits of engaging in the arts and how they can feed this into their work.

With the exhibition scheduled for January 2018, it's envisaged the project won't end there. It's hoped the project's legacy will make the Turner Contemporary a more accessible place for people with mental ill health while also empowering staff.

It's most certainly worth a note in the diary, save the date. We'll see you there.

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"I could see a fantastic opportunity before me and thankfully everyone came together to support it."



Dutch Light for Agneta Block by Jyll Bradley, photo credit Stephen White

LIFE GOES ON WHEN LIVING WITH DEMENTIA

It is often the simple ideas that are the most effective so when the team from the Dover and Deal community mental health services for older people (CMHSOP) began working closely with Liz Taylor, Kent and Medway's Alzheimer's Society Services Manager, it was the perfect solution to the issue of ongoing provision for people living with dementia. Together the teams developed a good process of support for people who had been seen by KMPT's community memory service.

So, how does this support process now work?

After a diagnosis of dementia, patients will receive an appointment with a memory service clinician to gather information, signposting and advice, support, a review of new dementia medication and access to other parts of the memory

service pathway, for example: post diagnostic groups and cognitive stimulation therapy programme. Since the beginning of June, the memory service clinicians also offer a follow up appointment with the Alzheimer's Society outreach worker. The outreach worker will keep in regular contact, supporting people and their families through their journey providing ongoing information and support when required, without an end point.

This new step in the process went live on 1 June 2017 and, since then, referrals have been coming into the Alzheimer's Society thick and fast. Linda Smith, KMPT's team leader for the Dover and Deal CMHSOP explained: "Each person we see with a dementia diagnosis is asked if they would like to be referred to the Alzheimer's Society so they can be introduced to support and services they provide. We've always

directed patients to the Society but not everyone makes contact with them. We've now made it part of their care pathway and helped the patient with their next steps by making the referral for them should they want it. Feedback so far has been very encouraging, it's a point of contact for them whenever they need it."

There have been many positive changes to the CMHSOP memory service in recent years which have developed through partnership working.

Linda said: "A few years ago, we developed a post diagnostic group which sees patients who are newly diagnosed. The four week course ends with a visit by Liz, (Alzheimer Society Service Manager). She lets people know what else is in the local community for them and then the following week, we visit the

dementia café which is run by the Alzheimer's Society. The group are invited to join us there to establish further links with the Society, others who have dementia and their families. It's a wonderful support network."

Liz went on to say: "One of the Café users who is living with dementia was very quiet and self-conscious at first but we soon discovered that he is a great story teller. On one occasion he had just finished telling a very funny and slightly rude story to a captive audience who were rolling around laughing when he commented: 'If I'd known having dementia was this much fun I would have got myself diagnosed years ago!' That to me is proof that collectively we are doing a good job and helping those living with dementia to carry on living life the way they want to live."



In Dover and Deal you can also find dementia drop in clinics at Age UK in Dover and GP surgeries in Deal. As a joint venue between services such as Dover and Deal CMHSOP, Admiral Nursing, Alzheimer's Society, Age UK and Carers Support this 'one-stop-shop' helps to improve the lives for people with a diagnosis of dementia, and their loved ones. It is also a great place for professionals to get together and share ideas. As well as a good venue for carers to find out what's new and what is happening in their local area.

Working with our partners to improve the services we provide across Kent and Medway is nothing new but with increasing initiatives like this coming from those links, we're sure to be helping those that really need it.

For more information visit www.kmpt.nhs.uk



TRANSFORMING SERVICES

A clinical model, previously used in children's mental health is being used by KMPT to transform services. CAPA, the Choice and Partnership Approach, was introduced to the trust three years ago by two professors, Anne York and Stephen Kingsbury. KMPT's Older People's Community Mental Health teams could see the benefit and set about transforming how they offered their services.

What is CAPA?

CAPA is focused on the service user and their family. The approach is collaborative and provides choices. Here at KMPT, it was used to reduce waiting times and improve the patients' pathway through our older people's services. In a nutshell, it means that when someone is referred to us they are called and offered an appointment that is convenient to them, within 28 days of referral. The patient choosing the date and time of their appointment was crucial. Paula Campbell, Assistant Director Older People's Community Mental Health Teams said: "If we send people an appointment without checking it's convenient, we often have people not showing up which can delay their treatment and add to waiting

lists but also costs the NHS money. Patients are taking ownership of their care right from the start."

Its small steps like this that have made a huge difference and it doesn't stop there. "When the patient comes for their appointment, they will see a nurse and an occupational therapist so there is a multi-professional approach. The patients care is then discussed with them while they are in the room. Next steps are decided there and then and before that patient leaves, they will have a care plan and the date for their next appointment if necessary. It's all about making decisions with the patient, not for the patient" explains Paula.

Paula references the process to a house. Referrals are sent through the front door, travel through the hallway, into sitting room and out the back door in a timely fashion. This leaves the front door open for more referrals - with no waiting.

Vicky Stevens was working as the transformation lead in the service when she introduced the approach to Paula, then a service manager in Canterbury, Ashford and Thanet. She was overwhelmed and was

concerned that the team couldn't pull it off with the limited resources they had to hand: "It wasn't until we started on one theme of the project that it all started to fall into place and before we knew it we were crossing off elements without thinking about it. Once one part of the approach was complete, others just happened."

The concept had to be taken on board by the whole team. For the clinician it was a shift in position from an 'expert with power' to a 'facilitator with expertise'. But the key to its success has been the organisation behind the scenes. "All this couldn't have happened without the fantastic support of the administrators. They have helped us put the systems in place to enable the process to work. For example, all diaries are available to view so everyone knows what is happening on a daily basis. Information for each appointment is ready to go, everything is at hand so there is no delay and if someone is off sick, it's easy to pick up where they left off."

Working in a different way also meant the team were able to take a closer look at each member of staff to see how they could use their skills to have a personal impact on



improving the service. "Looking at older people services three years ago, each team was operating in a different way. We looked at our core business and how best to deliver it. It wasn't just about CAPA it was ensuring we were using our talented staff in the best way. We asked them how they thought they could contribute and where needed to, we up skilled staff to achieve that. Without their commitment, it wouldn't have worked.

"Before this started we were not meeting the key performance indicator (KPI) of seeing 95% of referrals within 28 days consistently. We had high caseloads and waiting lists that were too long. Now we do not operate a waiting list and achieve our targets consistently. There is no one slipping through the net."

Vicky has now been appointed as Deputy Chief Operating Officer, a post she holds alongside her role as Older People Care Group Director. In this role she is taking her learning from this process and identifying other areas that could also benefit. "We have seen the benefits to one part of our trust already. We're confident we can improve other services with CAPA."

It's not just KMPT that has seen the benefits CAPA is bringing. Other trusts have been visiting Kent to see the success for themselves: "We've had a visit from other trusts who can see how we've made it work. It has been successfully implemented in adult mental health in New Zealand but we're the only mental health trust in the UK using this approach and we're happy to share our tools. At the end of the day,

it's important to work together to ensure patients receive the best of care – wherever they live."

“

“Now we do not operate a waiting list and achieve our targets consistently. There is no one slipping through the net.”



BACK IN CONTROL

COPING SKILLS FOR THOSE IN CRISIS

Anyone who has gone through crisis will know that their first reaction is to use whatever coping mechanisms they have available to them. These, despite giving immediate relief, may be more damaging in the long-term and potentially destructive leading to further crisis. Teaching new skills or alternative ways to cope is the aim of KMPT clinical nurse specialists running a Skills and Support Group set up in Medway and Swale.

“The learning from the group gives people options and a sense of control. Most importantly, it makes sure that they know it is all about choices,” said Skills and Support Volunteer, Pam, who herself has gone through crisis, and is now working in a voluntary peer support role alongside the Group’s pioneers, Clinical Nurse Specialists, Phil Harding and Helen Standing.

Helen and Phil worked at the Therapeutic House, Gillingham, which offered daily psychotherapy and support groups for people in crisis. When Therapeutic House closed in December 2015, they proposed a skills based group intervention for those in crisis, with poor coping strategies and impulsivity. This runs twice weekly from a local community centre.

“Most of the people referred to us have impulsivity issues and their ways of coping in a crisis are often self-destructive involving self harm, overdose, misuse of prescribed and non prescribed medication and alcohol,” explained Phil adding: “Our approach is to help people acquire a menu of new coping skills so that eventually their old ways of

coping will be way down that menu and they will choose to try the new ways.”

Taking up on this point Helen said: “All of us struggle to cope at some stage in our life, however, the people we see are those who are in crisis. Often this is related to a difficult upbringing or experiences in childhood and adolescence, where people have not had the opportunity to learn to manage and contain their emotions. We encourage exploration of new ways of thinking about emotion and distress, and this is a long, intense process. We help people develop a language of emotion. Practical tools and strategies that they can use in their everyday lives, to manage emotions and distress are explored. To do this we encourage discussion, use short video clips and have practical demonstrations.” Phil added “It is not an easy process because, if not sensitively communicated the skills can come across as us being dismissive or patronising and the service users who come to us are already struggling with low self-esteem so we don’t want them to feel that they’ve failed. It is essential to balance the skills within a supportive group where their struggles can be acknowledged.”

Volunteer Pam said: “I had a difficult upbringing. I had to fend for myself from a very young age. When you are in a situation like mine you don’t see it as being different until you reach teenage years and realise that after school your friends go back to loving homes, whilst you are in care. When I was about 15 I developed poor

coping strategies and used to self-harm a lot but I didn’t think there was anything particularly wrong and didn’t think I needed any help. After one particular ‘episode’ in 2011 I was assessed and mental health services became involved. I knew that I had issues but didn’t take them that seriously. Looking back, if I’d been honest with myself, I had real difficulty coping and it was only when I was referred to Helen and Phil’s group after another bad episode that I realised that I could take control of my life. Going through the group and coming out the other side as a volunteer has been an amazing experience and I wouldn’t want to work in any other area but mental health. I am hoping that I will eventually get a job and I feel that I’ve got a lot to offer through my life experience. I tell people in the group that it is okay to have relapses and you need to be able to deal with past issues before you can move on. Now my life is hopeful and bright – it is all about hope.”

“**Going through the group and coming out the other side as a volunteer has been an amazing experience and I wouldn’t want to work in any other area but mental health.**”

REDUCING SELF HARM AND SUICIDES

Between 2003 and 2013, more than 18,000 people in the UK took their own life which is equivalent to a population the size of Minster. 70 per cent of those who die by suicide are not known to secondary mental health services.

Mental health patients experience increased risk of suicide, self-injury, neglect, exploitation (physical, financial or sexual) and violence towards others. Managing and reducing risk is vital to protect staff, patients and the public.

In July 2017 the trust launched an innovative tool to improve patient risk assessment and make our processes more recovery and clinically focused.

A 'three tiered' risk summary was incorporated into 'Rio,' the trust's electronic patient records system used by clinical staff which includes a series of intuitive questions and prompts to help risk assess patients. The 'three tiers' cover patients across the spectrum including low, moderate or high risk.

The summary features guidance and prompts, for example using simple checklists it asks clinicians to consider risks during a patient's admission, such as attempting suicide within the ward.

Staff across the trust are using the new tool and include Antony Sheffield, Liaison Psychiatry Practitioner, who said: "The new system means staff are now talking more about risk management and the three tier summary is particularly good for more inexperienced staff who may need greater guidance."

Dr Michael Kingham, Consultant Forensic Psychiatrist, was the clinical lead for the project and explained: "The multi-tier risk summary was developed by clinicians and will help drive up standards of care across the trust. Staff can access the latest guidance from organisations, such as NICE (National Institute for Health and Care Excellence) and toolkits which help ensure every element of risk is assessed and managed. The summary also supports the trust's prevention of suicide and homicide action plan."

The new system is already receiving positive feedback from teams such as Thanet Liaison Psychiatry in Margate who receive a high number of patient referrals.


Clare Askew, Liaison Psychiatry Practitioner, said: "Our team has a high volume of risk assessments and the majority of our patients come through accident and

emergency (A&E) at QEQM Hospital in Margate. The system has already helped our team to improve the patient experience and more effectively manage risk.

"I recently risk assessed an older adult patient with cognitive deficit and potential safeguarding concerns who had undertaken a recent memory assessment. After meeting the patient and carrying out a risk assessment I had concerns that the patient was still driving. The risk assessment directed me to the website for the Driver and Vehicle Licensing Agency (DVLA) and helped inform my decision making, which included speaking to the relevant ward who then told the DVLA.

"There are a number of benefits to using the new system as it's very prescriptive and looks at what constitutes a high risk patient as well as encouraging clinicians to make contingency plans to further minimise risk. It also highlights best practice for example proactively involving the patient's family."

Risk will never be completely eliminated but the Rio risk summary is already making a difference to the lives of patients and staff.



“There are a number of benefits to using the new system as it's very prescriptive and looks at what constitutes a high risk patient.”

Sources:

- No. of suicides: Source Mental Health Foundation <https://www.mentalhealth.org.uk/statistics/mental-health-statistics-suicide>
- 70% figure: (NCISH 2017).



FIGHTING FLU



An outbreak of flu can have a big impact, especially on those who are most vulnerable or experiencing other illnesses, such as dementia and can cause severe illness or even death. Each year flu vaccinations help protect adults and children at risk of flu and its complications.

Many people say they have had flu when they are experiencing a heavy cold. Anyone who has had the virus will know that its impact is far greater than the common cold.

Kathy Lawrence, Medical Devices Coordinator with KMPT, experienced severe flu first-hand and said: "In January about two and a half years ago I had flu which completely floored me for a fortnight. I didn't leave the house for a week and I also developed a chest infection as a result. Having the flu really impacted my work and family life and I vividly remember my head feeling as if it was going to explode! I struggled to get around and it took me a while to fully recover. Everything ached including my arms, back and all my joints. Simple things like cooking meals were a struggle and my family had to step in to help me keep going."

Kathy now works behind the scenes alongside her day job as part of the trust's flu fighting team who start vaccinating staff from September onwards.

This year the trust is taking an innovative approach to fighting flu and protecting patients, staff and carers.

As part of our health and well-being programme, our staff MOT sessions which provide physical health checks for staff, including weight, glucose, blood pressure and cholesterol monitoring also include drop in flu clinics.

Michele Streatfield, Lead Nurse, Physical Health, said: "We wanted to make the flu vaccine as accessible as possible to our workforce so incorporating it into our MOT sessions gives staff another way to be protected. A huge amount of work is going on behind the scenes to ensure we vaccinate as many staff as possible."

The trust will vaccinate staff through its team of vaccinators at flu clinics and other settings from September to February and is using a range of communications tools

to engage staff and promote flu messaging including screensavers and flu branded merchandise including 'flu bugs'. There will even be a live 'jabometer' which will update staff about how many people have been vaccinated.

The campaign is part of NHS England's flu vaccination programme which requires healthcare trusts to vaccinate 70 per cent of front line staff.

Find out how you can protect yourself and your family by contacting your local pharmacy to get your flu vaccination.

www.nhs.uk

“Having the flu really impacted my work and family life and I vividly remember my head feeling as if it was going to explode!”

Join our exceptional team today

We believe in changing lives through giving excellent care that improves people's mental health. Join our outstanding team praised by the CQC for its 'strong, visible and person centred culture'.

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<http://www.kmpt.nhs.uk/work-for-us/>

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01227 812349

A glossy coat isn't essential but a passion for person centred care is.



Molly, our pet therapy dog

Inspected and rated

Good

