

Dorset Wellbeing and Recovery Partnership

The Dorset Wellbeing and Recovery Partnership is launching!

This summer edition of the newsletter will focus on the launch of our 2010/2011 Annual Report and our Implementing Recovery for Organisational Change work with the Centre for Mental Health in establishing a Recovery Education Centre. We have also decided to dedicate some space to "myth busting": answering some common questions about recovery and dispelling some myths which have arisen when we have been presenting to teams pan-Dorset.



Annual Report

We are pleased to announce the launch of our Annual Report. This has proven to become quite a lengthy document, detailing not only our achievements since the last Annual Report but also our plans for the future. There will also be an Executive Summary, so keep your eyes peeled for leaflets and posters with this cover:



The success of the WaRP could not have been achieved without the hard work and efforts of a number of individuals; these include staff, people who access services and their supporters. We would like to take this opportunity to thank people for their efforts, they do not go unnoticed and we are excited about the year ahead. We are particularly hopeful and optimistic as Dorset Community Health Services has become part of Dorset HealthCare University NHS Foundation Trust. We respect this is a time of great uncertainty but we also view it as an opportunity to transform experience and unlock potential for all.

Recovery Education Centre

The establishing of a Recovery Education Centre (REC) is deemed essential in order for organisations to fully embrace and embed the principles of recovery. This is a key work stream of the WaRP's involvement in the Implementing Recovery for Organisational Change (ImROC) project.

The Centre for Mental Health describes a REC as*

- being staffed and run by 'user trainers'
- delivering support and training for service users to train staff in recovery principles for teams and on wards
- running programmes to train service users as 'peer professionals' to work alongside traditional mental health professionals as direct care staff
- offering courses to people who access services, their families and carers on recovery and the possibilities of self-management.
- offering a range of links to general educational classes in the community and pathways to courses and other learning opportunities.

The WaRP will build on existing partnership working to develop a vision, project plan and training pathways for the establishment of the REC. These pathways will be underpinned by and enhance people's hope, opportunity and control.

If you would like any further information please contact Phil, Jackie or Becky.

*Sainsbury Centre for Mental Health (2009). *Implementing Recovery: A New Framework for organisational change*. Position Paper.

Myth Busters

When the WaRP is presenting the concepts and philosophies of recovery to teams the same questions or challenges are frequently posed. We have therefore developed a “myth busting” section for this newsletter.

Myth One

“Recovery is a model”

In the early days of the WaRP we spent time researching and discussing the concept of recovery with a variety of people including international leaders. Laurie Davidson (Devon Recovery Group) and Eugene Johnson (Recovery Innovations, Arizona) showed us that recovery is in fact a philosophy, not a model, and it should underpin all that we do. Slade* usefully articulates that there is more than one route to recovery. Therefore we must consider it as an approach and focus on an individual’s personal recovery, their own values and meanings and aspirations.

*Slade M (2009) *Personal recovery and mental illness*, Cambridge: Cambridge University Press.



Myth Two

“We’re doing Recovery already”

The WaRP acknowledges there are excellent examples of recovery orientated practice across Dorset. Nonetheless there remains a continued need to transform the experiences of individuals who access our services and of our staff. Recovery places a stronger focus on strengths, self-management and responsibility, identifying values and developing identities. Should you find yourself thinking “I’m doing this already”, ask yourself “How am I working with the person to enable them lead the life they wish to live?” Staff need to address imbalances in power and work in true partnership.



Myth Three

“The Wellbeing and Recovery Partnership is policing the Recovery Star”

The Recovery Star is one of numerous tools which can aid discussion around enhancing life domains which in turn can facilitate a person’s personal recovery. As a tool it is most successful where the person can take ownership of the star and proactively work in partnership towards the goals identified.

The WaRP is not directly involved in the implementation of the Recovery Star and the collation of data produced on completion of the Recovery Star locally. We are however interested in people’s experiences of using it.

Myth Four

“Recovery is letting people just do what they want”

Recovery is not about letting people do what they want. Recovery inevitably involves positive risk taking and is about sharing responsibility with an individual as far as possible and offering relevant choices, therefore enabling personal responsibility. The WaRP acknowledges the complexities around managing risk in a recovery orientated manner and is discussing establishing a risk advisory group with an overall aim of developing risk guidelines for staff and people who access the service.

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