Apologies to all for the long delay of this newsletter; we are conscious that there hasn’t been a newsletter since September 2012 and we wanted to update you on what is happening with the Dorset Wellbeing and Recovery Partnership. We had hoped to bring out our delayed Annual Report in early January 2013, but this has been on hold whilst the Mental Health Directorate Management restructure is taking place. We have also put our Recovery Steering Group and Recovery Network on hold until the restructure is agreed. We are hoping the 2011/2012 Annual Report and 2012/2013 Strategy Plan will be available mid-May 2013 and will coincide with the start of Implementing Recovery for Organisational Change (ImROC), Part 2.

The Dorset Wellbeing and Recovery Partnership was awarded demonstration site status for ImROC, Part 1 and we will continue to have significant involvement in the project moving forward on both a local and national level. Probably our biggest two achievements have been the establishment of the Recovery Education Centre (REC) and the increased involvement of Peer Specialists at all levels of the organisation, both in the shaping and the delivery of services. We have had people from a number of neighboring areas visit us to learn from our experiences, with particular interest being in the REC.

The Recovery Education Centre has really taken off; we now have nearly 500 students registered. All of our courses are open to staff, people who access services, and their carers and supporters. It has been a really powerful experience for us, using the shared expertise of lived experience and NHS clinicians and thus being able to give students tools to take control of their own lives.

During the Autumn Term (September to December 2012) the REC offered 390 places to 186 different students across 16 different courses, throughout Dorset. 97% of students, who completed a feedback form at the end of the courses, selected either ‘agree’ or ‘strongly agree’ with the statement: “I would consider attending another course offered by the REC” and 86% of students indicated that they felt more hopeful for the future having attended a course. The expertise and the professionalism of the trainers, particularly the peer trainers, has been a feature people have remarked upon especially.

We are also aware not everyone has had a positive experience and we are continually reviewing and adapting the content and delivery of our courses. We welcome all feedback, as this is a new and exciting venture and we are keen to learn as much as possible along the way.

Our new prospectus is due out mid April and our Summer Term will start mid May. This coming term we are looking to consolidate and improve the courses that we offer rather than increase the programme by launching new courses.

For more information on the REC, including how to register, see back page of this newsletter or visit:
http://www.dorsethealthcare.nhs.uk/services/recovery/the-recovery-education-centre.htm
Feedback and Updates on WaRP Projects

As the REC has really taken off it has meant that some of our other projects have not had as much time devoted to them as they may have done previously. Over the next few months we are planning to prioritise these projects. We are also due to present the findings of a number of local service reviews and we plan to launch our Team Recovery Implementation Plans.

Staff Wellbeing and Lived Experience Projects

With the current uncertainties brought about by the organisational restructure, we feel this has been a challenging time for staff and that the Staff Wellbeing and Hidden Talents projects are something that we are now keen to build upon.

The work with Hidden Talents has focused on two areas, firstly the lived experience survey of staff within the Mental Health Directorate. 31% of staff responded to the survey (n=434), with 53% of people self identifying as having their own lived experience of mental health problems. Equally, 53% suggested that a “them and us” culture exists to some extent and a further 10% viewed this as substantial. 39% of those with lived experience indicated that they had experienced some form of stigma and discrimination from colleagues or managers. When asked how Dorset HealthCare could more effectively support the wellbeing of its staff, people identified the need for focus on improved communication, awareness of emotional support for staff and opportunities to learn from lived experience. The full findings of this survey will be published in due course.

The other area the Hidden Talents project has been focusing on is the development of a Framework for Sharing Lived Experience and this is due out in the next two months. This paper is aimed at contributing to the ongoing discussion around how we can all use lived experience within our work.

We also have two further reports with findings due to be published. One of these reports will present the outcomes of the focus groups held to investigate the views of Ward Managers on the Aspiration Towards Zero Restraint initiative. The findings highlight a number of significant challenges in relation to this project, but also identifies approaches and opportunities to reduce the use of physical interventions on wards. The second report looks at the experience of trainers and students in the pilot term of the Recovery Education Centre (REC). These projects have been undertaken in partnership with the University Department of Mental Health at Bournemouth University and will be published soon.

Team Recovery Implementation Plans

We are starting to roll out our Team Recovery Implementation Plans; a number of NHS teams are starting to pilot them with a view that every team will eventually have one. This is based on the work of Nottingham NHS Foundation Trust. The purpose is to celebrate and bring to the fore some of the existing Recovery orientated practice that is already happening in teams and to also have a better understanding from an organisational perspective about the barriers to working in Recovery orientated ways. We see these Team Plans as integral in changing the day to day experience of people who access services, their supporters and staff. Once the Mental Health Directorate Management restructure has taken place James Barton (Director Mental Health Services) will be launching the WaRP Team Recovery Implementation Plans. If your team is interested in being one of the pilots for this work, please get in contact with us (see below).

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