INTERNATIONAL MENTAL HEALTH COLLABORATING NETWORK(IMHCN) INTERNATIONAL CENTER FOR RECOVERY ACTION(ICRA) WEST WALES ACTION FOR MENTAL HEALTH(WWAMH) ABERTAWE BRO-MORGANNWG HEALTH BOARD HYWEL DDA HEALTH BOARD

International Recovery focused Whole Life-Whole System Network for West Wales
Thematic Learning and Development Sets

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Recovery into Practice

- New partnership between INTERNATIONAL MENTAL HEALTH COLLABORATING NETWORK(IMHCN), INTERNATIONAL CENTER FOR RECOVERY ACTION(ICRA), WEST WALES ACTION FOR MENTAL HEALTH(WWAMH), ABERTAWE BRO-MORGANNWG HEALTH BOARD, HYWEL DDA HEALTH BOARD to work on Recovery into Practice.
- Partnership forged in 2012 and we jointly organised an international two day conference at the Botanical Gardens in June, with 180 people attending and speakers from 9 different countries about mental health and recovery across the World, and a series of Learning sets since November.
- Many positive ideas came out of the conference and it was agreed to arrange a series of learning sets over the next 12 months which we have been running, with an international autumn school in October 2014.

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2013 Annual International Think-Tank Conference "Recovery into Practice:

A Whole Life - Whole Systems Approach"

National Botanic Gardens of Wales, Carmarthen, 20th - 21st June 2013

Day One: Thursday 20 June

08:30 Registration and coffee (including displays of local services and organisations, A Recovery, Whole Life bookstall)

09:15 Chair: Professor Trevor Purt, CEO, Hywel Dda Health Board

Welcome to the Conference and Implementation of the Wales Mental Health Measure

Professor Mark Drakeford AM, Minister of Health and Social Services, Welsh Government

09:40 The Importance of Partnership and Community Development

Paul Roberts, CEO, Abertawe Bro Morgannwg Health Board, Angie Darlington, Director, West Wales Action for Mental Health

09:55 Whole Life - Whole Systems Strategy (WL-WS) Chair: John Jenkins, IMHCN & Director, ICRA

The Plymouth Experience, Sharon Claridge, Chair, Plymouth Mental Health Network, Nick Pennell, Director, Plymouth Mind, Dave McAuley, Director of Mental Health, Plymouth Community Healthcare CIC

10:40 Recovery into Action

Implementing A Recovery Strategy in Hertfordshire, Tom Cahill, Chief Executive, HertfordshirePartnership NHS Foundation Trust Acute and Crisis Services: The Host Families Project, Alison Ryan, Recovery Lead, Hertfordshire Partnership NHS Foundation Trust

Recovery Houses in Scotland and Italy, Ron Coleman, Director, ICRA, Working To Recovery Ltd

11:30 Coffee (Including displays of local services & organisations, A Recovery Whole Life bookstall)

11:45 Parallel Symposium (1) Chair: Professor Trevor Purt, CEO, Hywel Dda Health Board

Whole of Life Systems for vulnerable populations in inner city, Sydney Peter McGeorge, Director, St Vincent's Mental Health, Sydney, Australia

Day 2 Friday 21st June 2013

A Common Concern: Partnership, Integration and Interdependence

- 08:30 Registration and Coffee (displays of local services and organisations. A Recovery Whole Life bookstall)
- 09:15 Introduction to the day John Stacey, Manager, MAP and Paul Baker, Director of ICRA Whole Life
- 09.30 International examples of Good Whole Life-Whole Systems Practice Chairs: John Jenkins and LesRudd
- Reform of Mental Health in Johor Bahru, Malaysia, Abdul Abu Bakar Hospital Director, Permai
- Hospital, Tampoi, Johor Bahru Malaysia (and colleagues)
- To promote good practices and avoid bad practices in a community based service, our
- experience in Udine, Italy, Renzo Bonn, Director of Community Mental Health, Udine Health Authority
- Reform of Mental Health System in Brasil, Rossana Maria Seabra Sade, UNESP, Sao Paulo, Brasil
- Development of a National Preventive Mechanism as a tool for psychiatric reforms in Belgrade,
- Vladmir Jovic, IAN, Belgrade, Serbia

11:45 Developing local Whole Life - Whole Systems Recovery Strategies in Wales (Tea/coffee in sessions)

Four Thematic Workshops:

- Workshop 1: Implementing WL-WS in Wales, John Jenkins/Angie Darlington
- Workshop 2: Recovery into Practice for Mental Health Workers, John Stacey/Karen Taylor, Director ICRA and Working to Recovery Ltd
- Workshop 3: Recovery into Practice for Family Members & People with Lived Experience, Ron Coleman/HywelDavies/Terry Davies
- Workshop 4: Innovations in Recovery Oriented Services and Practices Paul Baker/Jorn Eriksen
- 12:45 **Next Steps: Panel Q&A Discussion** Chair: Karen Howell, Deputy CEO, Hywel Dda Health Board, Paul Baker, John Stacey, John Jenkins, Robert Goodwin, Jorn Eriksen, Roberto Mezzina, Rob Warriner, Angie Darlington, Peter McGeorge
- What has been learnt and how to further develop the WL-WS and Recovery Approach in Wales? Launch of Whole Life –
 Whole Systems Recovery Network
- 13:15 Close (including displays of local services and organisations) A Recovery Whole Life bookstall)

Purpose of the work

The Recovery into Practice learning sets have provided opportunities to develop in the following areas:

- Have an understanding of how a recovery approach differs to traditional approached to mental health care
- Reflect on current practice and compare with recovery approaches across the world
- Identify practice and approach changes together
- Develop a development plan for different areas of practice
- Set targets and monitoring systems

Role of IMHCN- Network

- The IMHCN is an International Non Governmental Organisation founded in 1992 by mental health organisations and individuals who believe in the recovery of individuals and who have developed good practices in community mental health based on the Whole Life- Whole Systems Approach. Its membership consists of professionals, managers, users, carers, policy makers from many countries.
- The purpose of the Collaborating Network is to bring together places that have been successful in developing good quality community mental health services, with those that are in the process of development and implementation. With the support of a continuous learning collaboration, organisations and individuals can benefit from each others' experience.

Vision of ICMHN

 Our vision is a world which respects and values the differences between individuals, enabling people who experience mental health problems, with appropriate supports, to lead fulfilling and productive lives using their strengths to contribute as full citizens and enrich our societies.

Role of WWAMH

- WWAMH is short for West Wales Action for Mental Health
- WWAMH is a registered charity and was started in 1991. It has been established as an independent charity and company limited by guarantee since 1995.
- WWAMH supports organisations with an interest in mental health to develop new and expand existing projects.

- WWAMH works with service users, carers, voluntary organisations, statutory providers and commissioners to improve the standards of mental health throughout West Wales.
- WWAMH works across Carmarthenshire, Pembrokeshire and Ceredigion.
- WWAMH employs 9 members of staff working across these three counties.

Core functions of WWAMH

Provision across West Wales of free mental health:

- Development and consultancy
- Information
- Training
- Health Promotion
- Facilitating Partnership working
- Service user and carer involvement

Currently working with 100 projects and organisations, and facilitate 14 different Networks and helped projects raise £700,000 last year.

Learning Sets

We have established an *International Recovery focused Whole Life-Whole System Network for South West Wales*, that is structured as thematic Learning sets with specific symposiums. This is a proven way of ensuring action based learning amongst communities of a common purpose to improve the mental health of citizens.

Purpose

- 1. The purpose is to develop a process which involves working on real needs and interests of members, supported by and using the knowledge and skills of small groups of IMHCN, ICRA, Health Board and WWAMH facilitators. They combine skilled facilitation, questioning and putting into practice what has been learnt and where necessary challenging familiar, concepts and ideas.
- 2. We have established 3 Thematic Learning and Development Sets with about 20 members in each set from a wide range of multi-agency stakeholders in Ceredigion, Carmarthenshire, Pembrokeshire and Swansea.

- The Learning set program was launched with a one day Symposium on developing a clear and broad understanding and a consistent working definition of recovery philosophy, values and practice
- This has helped to ensure that members of the Learning Sets have developed a common understanding, value base and vision of Recovery into Practice and the need for a Whole Life-Whole Systems Approach.

Four Seasons International School Autumn 2014

- The outcomes of the work and action plans will be presented at the Four Seasons International School "Recovery into Practice: A Whole Life-Whole Systems Approach" School in the autumn of 2014.
- The Learning sets have been a combination of an actual learning set and a. complementary virtual learning set using the ICRA/ICMHN web facilities and online conference call technology
- Each Learning Set will present and share their work to a Symposium at the end of the 12 months.

Agenda for Dec Learning Set

	Whole Life-Whole Systems and Recovery -South and West Wales Learning Sets and Symposium Program 2013-2014
_	2013-2014
L	Learning Set agenda December 2013
Ć	9:30 Welcome : Housekeeping for the group and individuals: Safety and Agreements
ļ	Angie Darlington/ John Stacey
Ś	9:40 Introductions
Ć	9:50 Overview of the programme: Recovery into Practice, aims and objectives
	☐ Reflecting on and changing institutional culture and practice John Jenkins
	□ Reflections on current practice John Stacey
	□ Emerging evidence base of Whole Life, Recovery Practice and Services Paul Baker
	10.20 Introduction: Personal Reflections: What thoughts have you had about your personal situation since the symposium?
E	Break into small groups
F	Feedback to all
,	11.20 Coffee break
,	11.40 Discussion: Led by John Jenkins
	☐ What does the term Whole Life Recovery mean to us?
	□ Is it just Recovery? What can help, what hinders?

- 12.45 Lunch
- 1.30 "Our recovery journeys "How it happened: 2 personal examples of recovery journeys
- Recovery, relationships, friendships and boundaries? Video discussion: Hywel Davies, Paul Baker and John Stacey
- Terry Davies, Video discussion: How you have been involved in a recovery journey, as a worker and/or family member
- 14.30: **Humane responses to distress** Presentation: John Stacey
- 15.00 Tea
- 15:15 What has been our own experience of being supported or supporting?
 Small Groups
- 16:00 Feedback to all
- 16:15 Next steps: Discussion on the day and preparation for next session (Assess the attitudes and behaviour in your workplace or in your community or treatment. Reflect on own behaviour)
- 17:00 Close of day

Structure of the programme

Developing recovery approaches in our areas of responsibility

- Development plans
- Mentorship
- Supervision
- Sharing experiences
- Twinning
- Visits

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Symposiums

- Symposiums on chosen topics with guest national and international speakers will be arranged during the year.
- Symposiums can be held during the year on various topics including:
- Recovery focused acute and crisis alternative services including Recovery Houses
- Integration of Mental Health into Primary Care Services
- Mobile web App. development and testing in the field
- A symposium to bring together the results of the Learning Sets

Steering Group

- We have established a small multiagency steering group to agree the program and to oversee the progress made and make amendments and additions during the year.
- They will also agree the symposium agendas and be responsible for planning and organising the all seasons international school in Wales in the autumn of 2014.

So why are we doing this work?

- Don't we have recovery based services already?
- Hasn't this work been done?
- Why is still so important to focus on recovery rather than illness?
- Why focus on inclusion rather exclusion?

 We need to keep talking about this and learning from each other

 Services which are recovery based are still not consistently delivered for everyone, and we still don't have a common understanding or belief

 If we don't keep talking about it we standstill

Welcome



The Institution has gone?



1888 Chief medical superintendents report St Davids Hospital:

 "Our chief aim is the promotion of recovery but sadly this can only be accomplished in a minority".

Community Outreach team?



Hidden in plain view

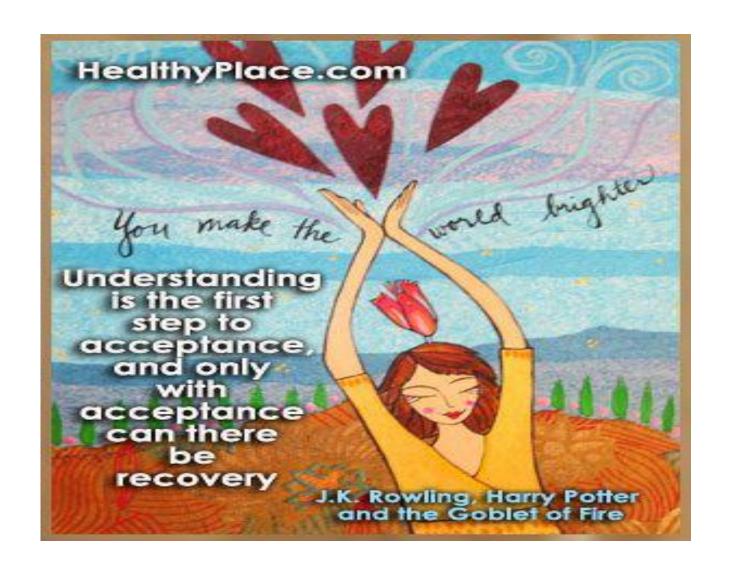


Friendship and peer support

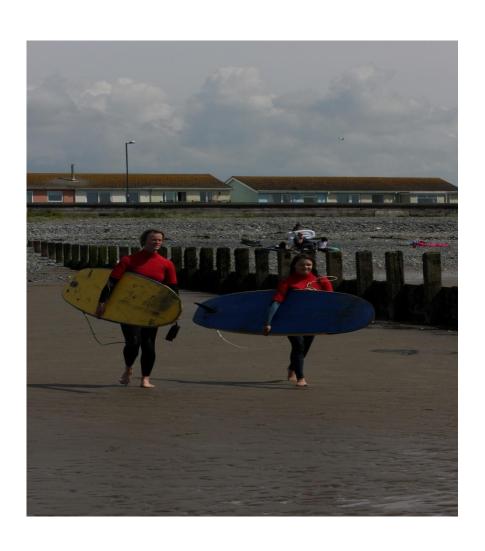


Some work remains!



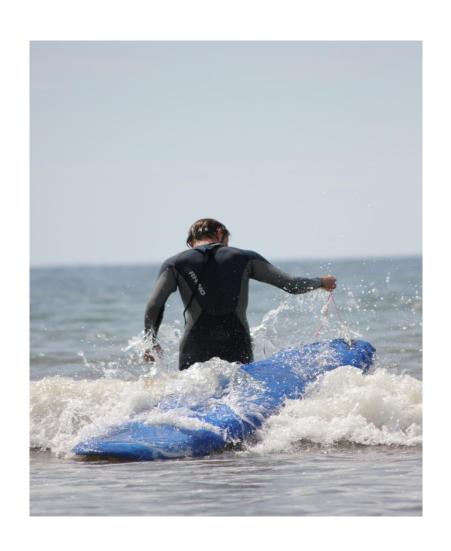


Recovery is hope





Recovery is possible



Thank you for your time

- For more information please contact:
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