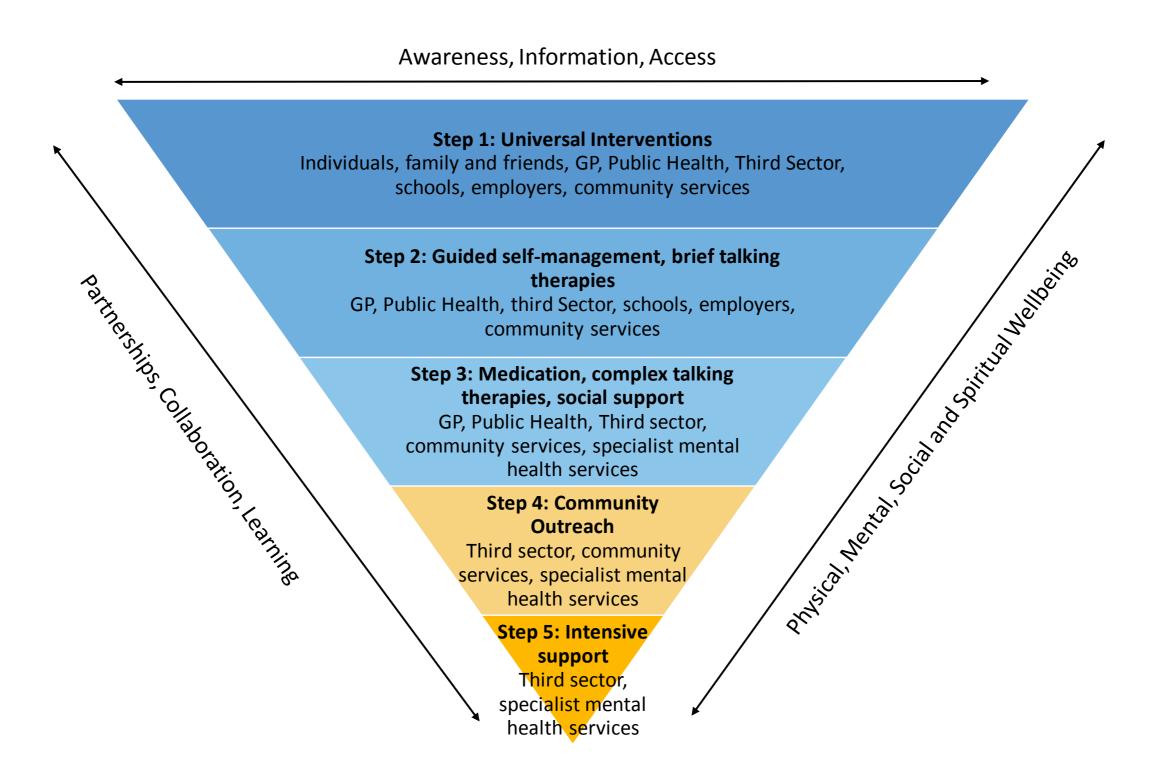
MENTAL HEALTH AND WELLBEING PLAN—SERVICE MAPPING EXERCISE

Purpose:

It was agreed that in order to effectively implement the Guernsey Mental Health and Wellbeing Plan (MHWBP), current services should be mapped against the five-tier framework model (pictured below) and any known service gaps identified.





Stakeholders engaged

Autism Representatives
Bereavement Service
Child and Adolescent Mental Health Service (CAMHS)
Carers Guernsey
Caring for Ex-Offenders
CareWatch
Community Drug and Alcohol Team (CDAT)
Consultant Psychiatrist
Drug Concern
Duty & Intervention Team
Education
Alderney—St Anne's School
Educational Psychologist
Education—PSHE
Emergency Department
Headway Guernsey
Health Improvement
Commission
Healthy Minds (formerly PCMHWS)
Maternity
MIND
Philippi
Police

Primary Care
Private Sector Representatives
Probation Service
Psychological Therapy Department
Public Health Services
Recovery and Rehabilitation
Recovery and Wellbeing Service
Reparative Care Team
Samaritans
Service Manager, Service for Older
People, Mental Health, CAMH & Alderney
Social Work / Social Care
Spirituality
States of Guernsey
Occupational Health
States of Guernsey HR
Styx
Substance Misuse JSNA Lead
outh Commission



GUERNSEY Step 1: Recognition, prevention, selfmanagement Service Horizons Drop-in group for all mental health service users promoting support, security and social isolation in a Step 2: venue that is accessible for the wider community. Held six Guided days a week for 2 hours. Facilitated by the Recovery and self-Wellbeing Service. management, **Healthy Minds:** GP referral and self-referral for skills brief talking based intervention for all people aged 18 and over. Guided self-help, workshops and computerised CBT. therapies High intensity therapies including CBT, counselling, EDMR for short periods of intervention. Step 3: **Reparative Care Team** Medication, Work with children in complex talking care, fostered and adopted children and families. therapies, social Therapeutic parenting, support trauma therapy with chil- Have a specific pathway for all sexually abused children Step 4: Community Outreach **CAMHS / Adult MH Eating Disorder** Service supported by Central and North Step 5: West London (CNWL) MH Services Intensive -

support

- Action for Children
 - Alcoholics Anonymous
 - Alzheimer's Society Guernsey Breaking Free Group
 - Bright Beginnings
 - Caring for Ex-Offenders
 - Citizens Advice Bureau
 - Espérance
 - Gamblers' Support Group GSF Mental Health Fellowship
 - Guernsey Bereavement
 - Guernsey Welfare Service
 - Guernsey Women's refuge
 - Headway Guernsey
 - Home-start Guernsey
 - Hope Singers Choir

LifeFit L'Vair

Liberate

- Makerspace
- Man Club Guernsey • Mental Health Service User Group
- Men's Shed Guernsev
- Overeaters Anonymous
- PND Support Group
- Relate
- Safer
- Samaritans for Guernsey
- Stvx Centre
- GAAS
- Youth Commission
- Trinity Café & Community Centre

Probation

• University of the Third Age Prevention of MH issues • Victim Support & Witness Service through healthy lifestyle Walk and Talk

> **SoG** Be a Wellbeing initiative. Phased return to work policy. Can refer employees for short term

Guernsey Employment Trust: Assists those with anxiety & depression to find

Aspen Project: Monthly support drop-in run by and for survivors of childhood sexual abuse.

Private Sector

place.

Larger employers will have policies of

their own. Local or smaller firms may

CIPD & Mind ran a survey on MH and

be repeated in future to view trends

over time. Compares to UK figures.

wellbeing in the workplace which may

not have such practical policies in

Maternity Services

Wellbeing Animals Guernsey

- Women can indicate a MH history at presentation with midwife / Obstetrician. Do WHOOLEY and GAD scoring. If reach a certain level trigger support.
- Maternal Early Childhood Sustained Home Visiting (MECSH), not a universal service (domestic abuse, looked after parent, young parent, drug and alcohol misuse)
- Beyond Blue: perinatal mental health support
- Evidence based 'Mellow' programmes

Maternity

New post Community Mental Health Nurse specialising in perinatal problems

Primary Care

- Prevention, good knowledge of patient and their circumstances.
- Normal variation of mood, signpost to appropriate resources and assist with self-management.
- Refer to Healthy Minds, Philippi, bereavement counselling, MIND for short term intervention depending on circumstances.
- Can refer for private counselling (currently unregulated)
- Prescription of medication and follow up
- Refer to secondary care

Community Drug and Alcohol Team (CDAT)

Adult disability psychologist sits within LD

service

Work with people aged 18+ who have problematic and harmful alcohol and/ or opiate dependence. provide practical support.

MDT working, also do relapse prevention work and

Youth Commission

- Support for those aged 10-18. Self-referral but also referral from agencies.
- Children's bereavement service, supervised by CAMHS.
- Staff are trained in variety of therapies including CBT, solution-focused therapy

Education

- 'The pod' at LM Primary, provision for those with SEN within the mainstream school and run by Les Voir.
- Places for children with autism at Amherst, La Mare High, St Sampsons High
- The Grammar School is only school with MHWB coordinator. Every school has MHWB
- 3R's in schools. Relationships, routines, responses as well as growth mind-
- All primary schools work to a growth mindset approach.
- Primary schools offer bespoke rolling programmes depending on needs of the

CAMHS Psychological Wellbeing

Practitioners: Brief talking therapies for mild to moderate conditions and in conjunction with a named healthcare professional for more complex cases.

CAMHS

Provide comprehensive specialist assessment and treatment service for children and young people with mental health problems.

Treatments offered include individual therapy, family therapy, and group therapy. Specialist CAMHS psychiatrists provide medical for specific mental health illnesses. Examples of therapies offered include cognitive behaviour therapy, dialectical behaviour therapy, Interpersonal psychotherapy and EMDR.

MIND

- Independent charity with the goal to promote positive mental health for the community by campaigning locally to improve services, raise awareness and encourage understanding.
- Campaigns include Stop Male Suicide, Team Talk, Express Yourself
- Launching campaigns: Mums and Dads Matter and Blue Lights Programme
- Developing a mental wellbeing club including Hope Singers Choir, signposting and advocacy.

Samaritans: Free, confidential support for people in distress.

Philippi Accessible counselling service for wide variety of needs with open referral system. Cost on an ability to

Prison: Wide variety of programmes including 'Self-Management & Recovery Training' run by Drug concern, an in house psychotherapist and referrals to family and couple therapist.

Psychological Therapy: For those who meet criteria for secondary care adult mental health service

- CBT
- Family & Systemic Psychotherapy
- Cognitive analytic Therapy
- Humanistic and Integrative Psychotherapies
- Existential Psychotherapy
- Mindfulness based therapies
- EMDR
- Art Therapy
- Adult disability psychologist as part of the Learning Disability Team Learning Disability Team)

Emergency Department (ED)

Although ED has no dedicated place of safety, this is usually the default for patients presenting with distress / self

Initial assessment and management of self ham / intoxicated patient.

Onward referral as appropriate.

propriate treatment.

Prison in-reach service supported by a

Work with offenders in prison and after release on emotion

regulation, anger management etc. through individualised

psychologist and psychiatrist

Mental Health

Outpatient Clinics

for all ages

Older adult services including

Memory clinic and Dementia

victed and non-convicted people.

programmes. Also run domestic abuse programmes for con-

Police

- Support when someone is detained under the Mental
- Assist in taking people to ED when in MH crisis, threatening or having self-harmed or suicide.

CAMHS team provides intensive, flexible and rapid, accessible care for children presenting with severe mental health difficulties.

Duty and Intervention Team Gateway into secondary adult mental

- health receiving referrals from GP, ED, prison, police and wards at PEH
- Assess and provide short term intervention or allocate to appropriate team e.g. RAWS, Psychological Services, **HSC Support Groups and voluntary** community services.
- Assess within 24 hours for emergency referrals and within the working week for urgent referrals.

Recovery & Wellbeing Service

Pathway of therapeutic engagement leading to discharge using two main tools; the Recovery Star and the Wellness Recovery Action Plan which includes developing tools to identify triggers, overcome symptoms and the promotion of wellness. Engagement in both the Oberlands and community. This will include in-patient services in the future.

Recovery and Rehabilitation

Delivers flexible assertive community treatment to patients suffering with severe mental illness, who require intensive treatment and interventions. Often long-term engagement with the service.

Available 7 days a week, 12

Off-Island Placements Small number supported off-island for intensive treatment, secure rehabilitation and in some cases containment. Women with post-partum psychosis sent to UK for ap-

MDT

Tautenay Ward: Eight bed older adult (75+) mental health assessment ward. Majority of inpatients have some degree of dementia.

Lighthouse Wards: Three 20 bed wards for adults with complex physical and / or mental health problems. Usually for long-stay patients.

Crevichon Ward: 17 bed general adult ward and ability to look after older adolescents or people with learning difficulties in the short term.

ALDERNEY

Step 1: Recognition, prevention, selfmanagement

Step 2:

Guided

self-

management,

brief talking

therapies

Step 3:

Medication,

complex talking

therapies, social

support

Step 4:

Community

Outreach

Police

Community work supporting vulnerable young people.

Youth Commission

- Youth Commission based in school providing close link to children and young people.
- Do achieve program in schools, equivalent of 2 GCSEs, teaching life skills.
- Support individual children
- Organise and run youth club
- Education surrounding healthy relationships, drugs and alcohol as well as career opportunities

CAMHS

- Work as part of the Alderney Support Team.
- CAMHS goes to Alderney once a month. This is for appointments but also more general mental health and wellbeing. If the day is not full with appointments, time is spent working on more preventative care to make the most of time onisland.

Primary Care

- Have a primary care counsellor funded by ESS who does low-level intervention. Equivalent of Healthy Minds.
- Signpost so Alderney Wellbeing group and relevant practitioner
- Prescription of medication and follow up
- Refer to secondary care
- Prevention, good knowledge of patient and their circumstances.
- Normal variation of mood, signpost to appropriate resources and assist with selfmanagement.

Education

- Signpost young people to support services
- Learning support assistant has been on Mental Health first Aid training and fed back to senior staff.
- Keen to have a formalised plan in terms of mental health and wellbeing.
- Support transgender students going through transition as well as the schools wider LGBTQ community, educating both staff and students.

MIND

- Opening the Alderney Wellbeing Centre with aim to have 10 groups running regularly by the end of the year.
- Rentable space for community activities.
- Potential for gym in the basement.
- Top floor being made into a training centre, equivalent of the digital Greenhouse, providing learning opportunities in potential partnership with the CofFE
- Looking to develop video-conferencing

Young People Alderney Support Team (AST)

 MDT consisting of education, health, police and others to discuss cases of concerns regarding children, wide range of issues, working flexibly to solve problems.

 Young people who need more specialist interventions (such as EMDR) are flown off island.

 For those in crisis, the Mignot can be a theoretical place of safety overnight until support can be found in the morning. Alternatively they can be flown over to Guernsey and admitted to Frossard.

Services for Older Adults

- Older adult Community Mental Health Nurse travels to Alderney monthly.
- Older adults who cannot travel are also seen by video link.

Secondary Care Services

- Alderney residents have access to all secondary care services available in Guernsey, but most likely need to travel to access them. Many patients prefer this as it maintains confidentiality.
- There are lower thresholds for intensive support and patients are more likely to be admitted to the ward than supported in the community in Alderney. Admissions also tend to be longer, ensuring the patient is ready to move back to Alderney upon dis-

Police

 Assist on a case by case basis with acute mental health episode. Working in conjunction with GP and other services.

Mignot

- Place of safety
- •Community Drug and Alcohol detox conducted at the MMH

Step 5: Intensive Support

Priority Area 1: A New Model for Mental Health and Wellbeing

Outcomes

People with a mental health need have access to a range of services to support their resilience, independence and personal recovery goals that are flexible and appropriate to their needs.

Policy Directions

- Services, where needed, will be personalised to the individual with a range of support options offered.
- Access to different levels of service are assessed according to need and not diagnosis. An individual may access interventions across different tiers at the same time
- Embed public health across all services focusing on prevention, early intervention and building resilience at a community level.
- All services are provided for all ages across all tiers by a range of organisations.
- Options for self-referral are a priority and offered as early as possible.
- There is a presumption of an individual's responsibility for their own wellbeing, and that more resources spent on prevention support people to self-manage their own mental wellbeing.
- No one is discharged from a service without a clear plan about what help and support is available.
- Data is shared across all services appropriately to ensure effective transition and a seamless delivery of care and support for the individual.
- Seek to offer free services to all users, where possible.

- Create a Mental Health and Wellbeing steering group, reporting to the Committee for Health & Social Care and including representation from all sectors to:
 - i. Identify resource requirements for each element of the Plan, and seek engagement and alignment with existing work within the States, as well as through corporate, high net worth and social enterprise development.
 - ii. Develop task and finish inter-agency working groups and multi-disciplinary teams to carry out the actions within the Plan.
 - iii. Create links with other States of Guernsey social strategies with Key Performance Indicators (KPI's) for mental health and wellbeing.
- Identify a strategy lead to be responsible for delivery of the Plan.
- Explore with Alderney how the model can best be adopted there to meet the needs of residents and ensure that they have access to all services.



Priority Area 2: Service Delivery Based on Evidence-Based Practice

Outcomes

People with a mental health need can access safe, effective and innovative services that are person, recovery and outcome focused, with greater protection and support for vulnerable people.

Policy Directions

- The collection of local data to drive service delivery and evidence improvements in the Islands mental wellbeing is a priority.
- Mental health and wellbeing is intrinsically linked to the Health Intelligence Team, so that decision making is always based on the most recent evidence available and subject to high levels of clinical governance.
- There is an agreed measurement for mental wellbeing across the community to enable effective interagency working and assessment for referrals.
- Where specialist interventions are required, the quality of service provision is assessed and performance of service providers consistently monitored.

- Investigate assessment of current levels of individual emotional wellbeing as part of the Healthy Lifestyle Survey.
- Investigate and agree individual measures of wellbeing that can be used consistently across steps and sectors.
- Adopt an Island-wide evidence based quality framework to be applied across all five steps where appropriate.
- Seek to publish a Mental Health and Wellbeing Report, at least every two years, to include:
 - i. Island wide service delivery and needs analysis and projections of future needs.
 - ii. Links into other States of Guernsey social strategies that have relevant KPI's and actions.
 - iii. A system for ongoing recording and collection of data.
 - iv. Measurement of the social impact of interventions over the long term.



Priority Area 3: Increase Awareness and Access to Information and Services

Outcomes

People with a mental health need know what services are available, can access appropriate information, treatment and support safely and are enabled to make their own choices and where the community has a greater understanding of the importance of mental wellbeing.

Policy Directions

- Liaise with agencies already working in this area to provide information in the most effective way possible and without duplication.
- Coordinate services for prevention and early intervention to ensure early access to services in non-stigmatised settings.
- Seek to reduce pressure on specialist services for those with complex needs.
- Prioritise closer working between agencies and sharing of information to develop clear care pathways across the community.
- Focus on working with the community and individuals to do everything possible to raise awareness, change negative attitudes towards mental health and decrease the stigma attached to seeking help.
- Introduce processes for self-regulation, minimum standards and registers of approved providers to enable individuals to choose from the range of services available across the community safely.
- Incentivise employers to work with local agencies to adopt appropriate workplace interventions to support staff mental wellbeing.

- Create a complete directory of mental health and wellbeing services across the community and make available through a range of media.
- Investigate the options for a Mental Health and Wellbeing Centre of Excellence whether physical or virtual that:
 - i. Integrates access to Steps 1-3 and provides equality of access to services;
 - ii. Coordinates access to community and third sector organisations;
 - iii. Focuses on all four pillars of wellbeing: physical, mental, social and spiritual; and
 - iv. Links clearly to developments within the Supported Living and Ageing Well Strategy (SLAWS) and Health & Social Care (HSC) in relation to single point of access to coordinated care.
- Agree an Island wide network of care pathways and referral criteria for service delivery throughout the model.
- Investigate the adoption of self-regulation for private providers of services, creation of minimum standards and a register of approved certified providers, where appropriate, linked also to the work underpinning the SLAWS.
- Build on work ongoing to establish a coordinated 'champions' programme in the community to raise awareness of mental health and wellbeing.
- Prioritise delivery of Happy and Healthy States Employees Wellbeing Plan.
- Support and adopt an Island-wide Mental Health and Wellbeing Charter for employers and a set of quality standards for mental health and wellbeing in employment.
- Investigate and promote the provision of a range of vocational support services for mental health and wellbeing to ensure an early return to work.
- Ensure that the model reflects the Emotional Wellbeing and Mental Health in Schools Plan being delivered by the Committee for Education, Sport & Culture through the Children and Young People Plan (CYPP).



Priority Area 4: Effective Partnership Working, Collaboration and Joint Learning

Outcomes

People with a mental health need to live in a safe, supportive community environment where everyone prioritises good mental health.

Policy Directions

- A presumption that service delivery will be based on interagency working across sectors, supported by shared: resources, decision-making, skills, knowledge and integrated working.
- The States of Guernsey will direct the commissioning of services, but responsibility for the delivery of the Plan is a joint one.
- The delivery of services will be by those agencies who are the most effective in the identified area.
- All agencies will work together to ensure the best possible outcome for the individual.
- Build a way to effectively co-ordinate mental and physical health provision to ensure services are wrapped around the individual.
- Provide opportunities for the community to connect through shared learning and the adoption of internationally recognised models of care and support.
- The needs and views of services users and mental health professionals are recognised and effectively listened to in all areas of service provision.
- Peer support is a fundamental part of personal recovery and requires the building of supportive networks outside of States service provision.
- Provide access to safe spaces to support the mental health needs of individuals 24/7.

- Officially, adopt and coordinate an inter-agency approach to Guernsey Mental Health Week through public mental health, and organise a Bailiwick-wide stakeholder conference annually during that week to develop collaboration and share best practice, seeking private sector sponsorship.
- Ensure that mental health and wellbeing are reflected within the HSC transformation programme, specifically in relation to:
 - i. Multi Agency Safeguarding Hub (MASH) arrangements for adults;
 - ii. Care plans for adults with complex needs that coordinate the input of all professionals; and
 - iii. The inclusion of carers needs in plans for individuals with complex mental health needs.
- Prioritise the early inclusion of Mental Health and Wellbeing within Care Watch, a community and staff forum developed by HSC.
- Create a collaborative on-line platform to share best practice between services and create community links for services providers and service users.
- Build on ongoing work to adopt a Mental Health First Aid training model. Prioritise training in workplaces and schools.
- Adopt a peer led, support training model. Prioritise the development of peer support groups and mentoring as part of service delivery across the model.
- Investigate the options for HSC practitioners within mental health services to have access to occupational health provision outside of the service.
- Establish a model for 24/7 support based in the community using interagency working.

