

# People, not process:

London's groundbreaking  
mental health alliance



Integrated Personalised  
Support Alliance

## The work of the Integrated Personalised Support Alliance (IPSA) is transforming mental health support in south London

After seven years in a string of secure wards across various London hospitals, Lee\* was resigned to a life in institutional care. His complex needs led to him being detained in hospital after being sectioned under the Mental Health Act when he was 18. He thought he would never live in the community again. Today, however, the 27-year-old lives at a small, community-based rehabilitation scheme in Lambeth, south London, not far from his mother. He has rekindled his childhood love of football, plays regularly at a local club and is learning to live more independently. At The Turrets, a seven-bed supported living service run by voluntary sector provider Certitude, Lee has intensive 24-hour support from on site staff such as a support worker, psychiatrist, occupational therapist and psychologist. Most people stay at The Turrets for up to six months.

Lee is rebuilding his relationship with his mother and the community life that he never thought possible is within his grasp. His mother, Irene\*, contrasts her son's secure inpatient care with his current living environment: "When someone's been sectioned, it's like being given a prison sentence for the whole family". Where her son is now, on the other hand, he is "supported... it's not a punishment".

### The Integrated Personalised Support Alliance (IPSA)

The Turrets is just one of several new services created as part of the Integrated Personalised Support Alliance (IPSA), a groundbreaking new approach to mental health care in Lambeth. Lee is among 261 people supported by the alliance, which launched in 2015 and is based on co-production (the creation of services that involve and are shaped by people supported, as well as the support provider and commissioning organisation that funds the service). The aim is to cut down on inpatient rehabilitation bed-based provision by moving people with long-term mental health issues from institutional settings into specially created independent, community-based supported living accommodation. Where possible, IPSA offers tailor-made support through, for example, personal assistants who can visit the person regularly in their own home.

Five organisations are involved in IPSA: Certitude and fellow voluntary sector provider Thames Reach, the South London and Maudsley NHS Foundation Trust (SLaM), Lambeth Clinical Commissioning Group (CCG) and Lambeth Council

#### What is the Integrated Personalised Support Alliance (IPSA)?

- *IPSA began in 2015 as a new approach to the rehabilitation and recovery of people with long-term mental health conditions in Lambeth*
- *Operating under an "alliance contract" (a single contract for all providers), IPSA aims to reduce the reliance on bed-based residential and institutional provision, so that people can move to more independent, community-based living*
- *Five organisations are involved; voluntary sector providers Certitude and Thames Reach, the South London and Maudsley NHS Foundation Trust (SLaM), Lambeth Clinical Commissioning Group (CCG) and Lambeth Council*
- *IPSA supports a total of 261 people who are in residential or nursing care, inpatient rehabilitation wards or in more specialist mental health wards across the country*
- *New services developed under IPSA include community-based supported accommodation and an intensive, multi-disciplinary support team (Alliance Rehabilitation Team), which can also offer tailor-made support at home*

#### Cutting costs and creating community support

As Lee's experience suggests, IPSA's results so far are promising. The new integrated way of working has reduced the number of people going into residential care by 43%, based on the original cohort of 261 people. It has also led to a 79% reduction in the number of inpatient placements funded by the IPSA and saved almost £2.5m through offering more recovery focused community alternatives to residential or inpatient provision.

The IPSA grew from the CCG and council's Lambeth Living Well Collaborative, a partnership including a range of stakeholders across the system. The aim is to promote recovery, choice, and community participation and working towards outcomes identified as important by people using local health and social care services. IPSA shares these principles, delivering personalised support (support that offers more control, choice and independence) to avoid repeated crisis and hospital treatment.

### The success of the new approach

*The work of IPSA since 2015, has:*

- *Saved almost £2.5m through finding alternatives to residential, nursing, inpatient rehabilitation and spot placements (placements that fall outside of contracting arrangements) reducing overall spend from £12m before the IPSA, to around £9.5m*
- *Reduced the number of people going into residential care by 43%, from 30 people in 2013-14 - before IPSA launched - to 17 people in 2016-17*
- *Led to a 79% drop in the number of inpatient placements funded by the IPSA; IPSA funded 33 inpatient placements in its first year, by the end of the second year, it paid for just seven such placements*
- *Led to 69% of people (181 individuals) finding more appropriate accommodation ie stepping down from residential care to one of the IPSA schemes, to their own BRIL flat, or being discharged from hospital to their own home or supported accommodation*
- *Enabled 49 people (19%) to access a personal budget*

The IPSA initiative operates under an alliance contract for mental health rehabilitation services in Lambeth – a new approach in the health and voluntary care sector. Providers have one contract and a single performance framework that ensures everyone works to the same outcomes. The contract focuses on people's rehabilitation and recovery - not the results of individual providers – with everyone judged on overall performance. All alliance partners, irrespective of size or if they are a commissioner or provider, have an equal role.



### Strength in shared purpose

"It's collaboration with teeth," explains Aisling Duffy, chief executive of Certitude. "Often, there's a lack of real understanding between different local health and social care agencies about how different parts of the system work. A voluntary sector agency could stereotype the NHS provider as only being concerned with the medical model, with little commitment to softer outcomes. Or NHS providers may see the voluntary sector as only looking after the 'worried well', rather than people with really complex needs. This reinforces silos, fails to meet the life outcomes people using services want and is more expensive." "Collaborating," says Duffy, gives everyone "a sense of shared purpose" in mental health services: "The alliance has begun to break down some of those barriers, so the 'system' is not owned by any single one organisation."

This view is echoed by Richard Sparkes, general operations manager, adult social care, at Lambeth council. He adds: "The outcomes achieved by IPSA so far are testament to what can be achieved when these core principles are put into practice and people are encouraged to embrace and think beyond traditional



professional roles and boundaries. This commitment across the alliance partnership has enabled people to achieve outcomes that have embraced creative ways of achieving greater independence and personalised support focusing on the person and not a pathway or specific service need.”

Denis O'Rourke, the CCG's and council's assistant director for mental health commissioning, adds: “Alliancing focuses on outcomes that matter, which are the impact that services have on people rather than the more usual contractual arrangements which tend to promote professional or organisational interests.”

### **Neighbourhood practice reflecting national policy**

The work in Lambeth is timely, supporting national developments in health and social care. Nationally, there is a growing focus on the inadequacies of services for mental health patients in the community. The Commission on Acute Adult Psychiatric Care, set up by the Royal College of Psychiatrists in 2016, was partly a response to concerns about alternatives to admission.



There is also increasing awareness about the need for statutory organisations and the voluntary, community and social enterprise sector (VSCE) to work more closely in health and care. For example, the Care Act 2013 and the NHS' vision of the future, Five Year Forward View, both acknowledge the sector's role in providing services. In addition, the VSCE review, produced by VCSE representatives with the Department of Health, NHS England, and Public Health England in 2016, called for the sector to be recognised as a key partner in designing support.

### **A trailblazing team**

The Alliance Rehabilitation Team (ART) is a key element of the IPSA service that demonstrates exactly how professionals across voluntary and statutory organisations can integrate to create better outcomes for people who need support.

The 23-strong multi-disciplinary team of voluntary sector staff, social workers, nurses, occupational therapists and consultant psychiatrists combine social care assessment with support and clinical care co-ordination. Team members provide intensive support at home to people who would have previously been admitted to hospital. They also deliver outreach to those who continue to need inpatient rehabilitation.

Staff help individuals identify their housing needs, encourage them to develop friendships or to secure personal budgets which offer more control over social care support. People might use their budget to join a gym, redecorate a flat, or buy a travel pass, for example, (around 19% of people supported by the IPSA have accessed a personal budget over the two years – when IPSA began supporting them two years ago, none had a personal budget.)

Ruth Hogg, head of alliance services at SLAM, explains: “Having the voluntary sector within the ART team

gives us an innovative and unique approach which combines both the clinical and the social care role... We might have two to three members of the team - a social worker, occupational therapist and a voluntary sector social care support worker, for example - involved in working with one person at the same time."

Sandra\*, 58, has been supported by the ART since its launch in 2015. Before she met the team, she had spent most of her life in institutions, including a spell in prison and residential care. During her 13 years on secure wards in five different hospitals, she had a maximum of three hours a day unescorted leave.

She has faced many challenging circumstances, several suicide attempts, a diagnosis of dissocial personality disorder, recurrent depression, visual impairment, glaucoma and diabetes. Staff in the ART intensively supported Sandra, working with Thames Reach to enable her to move into her own flat.

Thames Reach has developed specialist accommodation for IPSA, the Brokerage and Resettlement in Lambeth (BRiL) project. BRiL uses social investment finance to buy 20 one-bed flats on the open market, creating more housing options for people with mental health needs who are ready to move from residential care or hospital. Sandra has moved into a specially adapted flat, has had support to access courses on living independently and secured the help of a personal assistant for 14 hours a week for things like shopping, appointments and social activities.

All the elements of Sandra's recovery have been supported by the integrated ART team, something she appreciates: "It's like an umbrella, and people have been working well together... I am living life to the full and getting the support I need."

## Supported living solutions

Another scheme established specifically for IPSA is a supported living scheme of nine apartments in Railton Road, Brixton, provided by Certitude. Supported again by ART staff, Railton Road offers 24 hour personalised support and a ground floor peer support hub where people who have lived experience of using mental health services can support each other. The aim is to help people to develop the skills and confidence to make the transition back to the community following a stay in residential inpatient services. The average length of stay at Railton Road is 18 months.

## Success - and the next steps

According to the alliance's latest figures, 69% of the IPSA's original cohort (181 individuals) have moved to a more appropriate and less institutional setting. They have moved for example, from residential care to one of the IPSA schemes, to their own BRiL flat, or been discharged from a ward to their own home or supported living accommodation.

There are of course huge challenges, says Sue Field, IPSA programme director: "One of the main issues is the fact that all the

### From hospital ward to home in the community – Janet's story

*Janet\* lived in her mother's house until her mental health deteriorated and she was detained in a hospital rehabilitation unit for two years. While in the ward, her mental health began to stabilise, but she was isolated, stayed in her bed on most days, and became and disengaged from her family.*

*Under the Integrated Personalised Support Alliance (IPSA), Janet moved to Certitude's Railton Road project in Brixton, where she has had 24 hour support. She has established a great relationship with the support staff and in particular her key worker. Her greatest hopes, which emerged during her key worker sessions, are to build better relationships with her siblings. Janet also said she wants to get outdoors more, and explore London.*

*With support, Janet has started going to local wellbeing workshops as well as classes in painting and yoga. She also attends monthly life drawing sessions in Railton Road's peer support hub. Janet has been able to change her life through developing meaningful relationships, focusing on the things that are important to her and keeping tangible goals in mind for the future.*

*\*name has been changed*

partners have different organisational and cultural approaches to how they support people – which can lead to differing expectations and ambitions of what someone is able to do. Clinical colleagues, for example, will be mindful of risk, while voluntary sector organisations may have more experience of using community resources such as peer support to encourage community engagement.” What has helped, says Field, is that staff from different sectors have been brought together from early on in the partnership- in workshops, for example - to learn about their respective skills and expertise. She adds: “This has helped to build relationships and share learning, which – in turn – has supported people to take positive risks in their recovery and to live in the community.”

Encouraging IPSA members to develop a wider perspective, adds Field, means that there is also a bigger, system-wide understanding about issues like budgets and spending. “Developing trusting relationships encourages the sharing of risk and activity in a different way, for example, absorbing an overspend in one specific area so we underspend in another, which allows us to save money across the entire system.”



As for future plans, says Field, it is hoped that more people to have personal budgets (so they increase control over their care). The IPSA also plans to place a greater emphasis on supporting people’s physical health needs alongside their long term mental illness.

Field adds that another key priority is to expand opportunities for people to engage in peer support opportunities. Having someone available to participate in activities in the community supports the development of friendships, the creation of individual networks of support as well as skill acquisition, which builds resilience to support people to recover and stay well’.

This approach reflects some of broader outcomes of the IPSA, such as to support people in finding employment or volunteering opportunities.

## A blueprint for the borough?

Given the success so far, O’Rourke says Lambeth now wants to apply the learning and experience from IPSA on a broader scale. O’Rourke recognises the value in closer alignment of health and social care organisations, so that all aspects of someone’s needs are addressed. He adds: “We’re trying to work towards the principles of alliancing across the area’s health and social care. Mental health is the first one, then we might consider the care of older people, and there are early discussions happening about children services.”

There are, of course, hurdles in rolling out this kind of work, as O’Rourke explains: “The challenge from commissioning point of view is how we move from a focus that is about outputs to something that is much more based on strong relationships with providers. You need to move away from a transactional approach in provision.”



For Certitude's Aisling Duffy, using the IPSA method in other aspects of health and social care support – and indeed in other parts of the country keen to follow the model – rests on transforming attitudes among commissioners and providers. She explains: “The biggest challenge is creating and integrating a culture that respects the differences of separate organisations, but creates a sense of common purpose. And visionary commissioning is vital.”

SLaM's Ruth Hogg also stresses the importance of clinicians rethinking their usual outlooks: “It's about stepping outside of a mindset that has been more clinically focused, and starting to see people as individuals – genuinely.”

## People – not process

As the IPSA members stress, overturning traditional relationships between partners, co-producing support and focusing on individual, not organisational, outcomes, makes it easier to reconnect people with their communities and families. This, in turn, helps to ensure that someone's mental health is rehabilitation more sustainable.

The experience of Lee and his family is testament to this approach. “It's given him his life back,” says his mother Irene. She describes the transformation in her son's life since IPSA's involvement as “a miracle”, adding: “It's given me the chance to be his mum again...I didn't ever think I'd get the chance.”



*\*Names have been changed*

*The people depicted in the photographs contained in this document bear no relation to the people featured in the text.*

The Lambeth Integrated Personal Support Alliance is comprised of:

**NHS**  
**Lambeth**  
**Clinical Commissioning Group**

South London and Maudsley **NHS**  
NHS Foundation Trust

  
**Lambeth**

  
**certitude**

**ThamesReach**  
**power**

