

What have we have  
heard today ?

Making it Better  
Together

What we have heard  
to day



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- Front door – there has to be many entry points; these need to be in the places people go;
- Too many signposters, not enough people supporting you.
- Waiting list for the front door !
- If people have to wait they need some support while they are waiting
- Referrals to the hub are getting lost – need follow up, tracking
- Introductions to other services, and follow up, not passed around
- Its not a service but an approach
- Data, sharing and information systems to support responsiveness and

## Loading...

# What we have heard to day

- People want an empathetic, human response right for them 24/7
- Criticism of the often poor response from the SLaM 24 hr line
- Need a wider range of safe places,

- Sanctuary is good but...not right for everyone, and wont take everyone, cant respond quickly for some (risk assessments)
- Clear information about what to do in a mental health crisis and where you can go available in places people go everyday, not just NHS etc



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- Holistic, need to focus on physical health as well as mental health.

- Difficult to find and access the right services for an individual
- Poor information about service/care options
- One assessment as gateway to all services
- In patient stays treated seperately.
- Too much attention paid to medication at expense of other therapies, interests and goals.
- Full involvement in care needed at all points
- People don't have places to go to socialise, meet people or have things to do
- Better police involvement – started to happen



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## What we have heard to day

- The key person needs to be recognised as important, listened to and fully involved

- Key person needs training and support for themselves – high risk of burn out, how to cope in different situations etc
- Choice – key person chosen by SU – someone they can have a trusting relationship with.
- Recognise the key person could be a friend, family member, someone in the community – rather than a professional.

- Key person needs to be able to access information about services available
- Safeguarding and the key supporter role.



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- **Repeated assessments, each service has its own way of doing things and own criteria.**
- **Waiting times – at lots of points – creates anxiety, hard to stay well**
- **Housing is a huge issue – lack of appropriate housing creates mental health problems; waiting for appropriate housing stops people recovering**
- **A ‘golden thread’ of support by a peer along the journey**
- **Consistency of professionals involved in care (e.g. same psychiatrist)**
- **Poor co-ordination – no one knows about me, no one knows what’s available**
- **Lack of support at key points; e.g. admission; discharge; crisis and sectioning; referral to a new service, introduction to a service.**
- **No follow ups from people who referred me when I go to another service**
- **People left in ‘limbo’ between services; overall often poor ‘customer service’.**





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## What we have heard to day

- **Need wider range of formats inc video**
- **Digital divide still exists – on line not good for everybody – face to face and hard copy still important.**
- **Better information about medication at the point of assessment**
- **Better information about what to do in a crisis, currently ambulance, police or A&E emphasised**
- **Credibility of the information giver - quality of signposting, depends on the signposter**
- **Information should be neutral.**

- **Information should be person centred, designed in a way to answer questions people have; not to publicise organisations.**
- **One written directory, rather than lots of different info - MIND and Mosaic directories are well liked.**