The Art of Social Prescribing

December 11th 2014

Dr Mandy Chivers
...Some facts

• In the UK 1 in 4 people will experience mental illness in their lifetime.
• M I is the largest single economic cost to the NHS with wider costs amounting to £105 billion a year.
• Mental health problems are estimated to be the commonest cause of premature death.
• Depression is associated with 50% increase in mortality for all diseases.
From Restitution to Quest

- to raise expectations, quality and effectiveness.
- put the person using our services at the centre.
- co – produce contemporary services which focused on recovering wellbeing.

From this ...

to this...
HOW: Translating what I had learn’t in clinical system change/ doctoral research and applying in MCT

“Farmers don’t grow crops they create the conditions in which crops can grow”

Gareth Morgan

“I am always doing that which I cannot do, in order that I may learn how to do it”

Pablo Picasso
This is our organisation...

What's this then??

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Thinking differently

About organisation and organising
Systemic
Complexity theory
Shifting the context
Shifting the conversation
Novel partners
Organising differently
Distributed leadership
Public narrative
Mersey Care
Get Into Reading

Post of reader in residence, occupied by Mary and Katie from The Reader Organisation since September 2007.

Reading groups have developed in a broad range of settings across the Trust: currently 40 groups.

Mersey Care staff have received training to co-facilitate and then take over facilitation of groups.

The success of the reading groups led this year to Mersey Care taking part in a Liverpool Literary Festival.
Musician in Residence

- Members of the Royal Liverpool Philharmonic Orchestra play in inpatient settings
- Service user visits to the Philharmonic Hall supported by staff and musicians in residence
- Staff and service users offered discount to assist access to concert performances
- Acute psychiatric units
- Low Secure Unit
Using the gallery as a resource to work creatively with service users

- at the gallery
- in inpatient settings
- acute psychiatric units
- Low Secure Unit
- early interventions service
Alice in Wonderland

04 November 2011 – 29 January 2012

Open every day*
*closed 24 - 26 December

www.tate.org.uk/liverpool

In association with:

Mersey Care NHS Trust

With thanks to a range of supporters

Media partner:

THE TIMES
A literary festival that takes place each year in Liverpool, organised by The Bluecoat, an arts centre.

Mersey Care worked with The Bluecoat and The Reader to host four author-led events and to promote interest and participation throughout the Trust.

Staff and patients at Ashworth Hospital organised a week of special literary and cultural events as part of the festival, culminating in a reading by author, Brian Keenan.
Mersey Care Dances

A collaboration between the Trust and Liverpool Institute of Performing Arts
Groups for inpatients facilitated by a professional dancer and supported therapeutically by occupational therapists
A film of the project provides persuasive evidence of the value of the activity as experienced by the service users, the dancer and the therapeutic staff
‘Headsound’

A programme of projects using new media arts; sound, animation, film, VJ’ing to teach new skills and provide creative opportunities to people who use Mersey Care Early Intervention Services

The programme takes place in the medialab at FACT, is artist-led and is supported by a practitioner from the Early Intervention Service

‘Headsound’ have presented two performances at FACT and group members have supported artists at public events
Flourishing People, Connected Communities
The Journey from In-Patient Specialist Mental Health Services

Model
Development of the health & wellbeing treasure map and recovery compass to empower people to navigate complex journeys to recovery and wellbeing. The model includes six anchors (connect, be active, take notice, keep learning, give and nourishment) which aim to prompt thinking in relation to the things in life that are important to mental health and wellbeing and perhaps should be prioritised in day-to-day routines (Adapted from New Economic Foundations five ways to wellbeing).

The model suggests that following the advice of these anchors enhances personal mental health & wellbeing by making a person feel good and by bolstering mental capital. The anchors play an essential role in satisfying needs for positive relationships, autonomy, competency and security and support the areas identified from the wellbeing treasure chest conversation.

The model also includes the ‘Wellbeing Treasure Chest’ activity as a translation tool to help people understand the concept of mental health and wellbeing and to influence CPA processes and particularly inclusion in peoples recovery plan.

Area of Inquiry
Maximising the potential for improved health and wellbeing (flourishing) on discharge from in-patient mental health units by further developing the ‘Health and Wellbeing Treasure Chest Conversation’ to empower mental health service users to navigate complex journeys to recovery and enable a healthy balance of occupation.

Conceptualisation of Mental Wellbeing
Mental health is a state of wellbeing in which the individual realises his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully and is able to make a contribution to his or her community (World Health Organisation 2001). Wellbeing is most usefully thought of as the dynamic process that gives people a sense of how their lives are going through the interaction between their circumstances, activities and psychological resources or ‘mental capital’ (New Economic Foundations Five Ways to Wellbeing).

The Relationship Between Occupation, Mental Health & Wellbeing
People have an intrinsic drive to be active that is expressed through the occupations that form the fabric of their daily lives. Occupation is the term used to describe all the things that people do in everyday life, including caring for themselves and others, working, learning, playing, creating and interacting with other people. Occupation is the mechanism by which people maintain themselves in the world and realise their potentials (Wilcock AA (1998) An occupational perspective of health. Thorafare, NJ: Slack).

To maintain normal functioning, the body and mind must remain active. Through what they do, people develop skills, exercise and test their capacities, interact with others, adapt to circumstances, meet basic vital needs, express who they are and strive towards reaching their goals. If a person is deprived of activity, or has access to only a limited range of occupations, physical and psychological health will suffer.

Maintaining an acceptable and personally satisfying routine of activities that have meaning and value for the individual and gives a structure to time and creates a sense of purpose and direction to life. Disruption of fulfilling daily routines, by illness, injury or external circumstances, can lead to dissatisfaction, disorientation and distress. Occupation is, therefore, essential for good mental health and wellbeing (Recovering Ordinary Lives: College of Occupational Therapists 2006).

Social Determinants of Health
A person’s mental health sits within their life experiences of family, friends, community and broader societal influences. This ecological view of health and wellbeing is significant to our understanding of public mental health and allows analysis of the relationship between individual experience of health and wellbeing and the environments in which people live, work and play. These determinants translate into either risk factors or protective factors for mental health. Protective factors help to enhance and protect positive mental health and wellbeing and enable people to be resilient in the face of challenging life experiences.

The themes identified by services users in the Wellbeing Treasure Chest align well with the protective factors identified under this model, such as positive sense of self, good coping skills, good physical health, employment, supportive social relationships and community participation.

New Economic Foundations ‘Five Ways to Wellbeing’

Action Learning
An action learning set was established, representative of service users, care’s, multi disciplinary staff from in-patient and community settings to develop further the ‘Treasure Chest Concept’ and its use as a translation tool to enable people to explore the concept of mental health and wellbeing and empower the development of peoples care plans/discharge plans reflective of their needs in this area.

The set has commenced work mapping the community capacity to support the six anchors in the treasure map. The focus being to highlight networks, partnerships, knowledge transfer, problem solving and community infrastructure to support people on discharge. The set is taking an area at a time and has commenced with Nutrition.
SHIFT HAPPENS

CO-CREATING HEALTH IN MERSEY CARE NHS TRUST

A STUDY OF CREATIVE APPROACHES

JUSTINE KARPUSHEFF
BASELINE RESEARCH AND DEVELOPMENT LTD
JULY 2011
An independent evaluation of creative approaches in MCT shows :-

- Improving the quality of care.
- Shaping the culture of the organisation facilitating hope and opportunity.
- Improving positive mental health, wellbeing and recovery in simple, practical ways.
Next Steps …Doctoral research

- ‘how taking part in cultural activities might foster the social participation of people with mental health issues in acute care.
- We are following a group of 30 people over two years to explore their participation and social contact, using social network analysis, interviews and observation. The second wave of interviews has just completed and some early findings emerging.
- It’s worth noting here that preliminary data suggests that not only does taking part in cultural activities increase social contact, but it has the potential to widen social boundaries and offer new valued social roles. ‘Justine Karpusheff

‘Because when I’m there, I’m not so and so the service user, I’m [xxxx] the Artist’
Reflections, concepts…..
How do we create the conditions in which good ideas can grow?

- **Creative environments:** which enable people, their ideas and passions to flourish

- **Culture:** ideas are valued and people are not frightened of getting it wrong

- **Practical support:** how do we remove the barriers and help people to turn good ideas into reality
Integrating learning and change...

ref Chivers Pedler

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<th>INNER</th>
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| -Psychological  
-Spiritual  
-Emotional  
-Belief  
-Identity | | -Behaviour  
-Technical  
-Physical  
-What we say and do | |

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| -Organisational culture  
-Meanings and stories  
-Group values | | -Networks  
-Systems  
-Economies  
-Policy and delivery | |

Reflexivity between domains of understanding and acting: pulse and focus dependent upon context.  
( Wilber adapted )
How do we create change at scale?

The ‘mobilisation’ mindset for improvement

Energy focus
Imagination, engagement, participation, moving, mobilising, calling to action

The ‘clinical system’ mindset for improvement

Effectiveness and efficiency focus
Metrics and measurement; clinical systems improvement, reducing variation, pathway redesign, evidence based practice
The new era represents a shift in thinking ref Helen Bevan

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<td>States a minimum performance standard that everyone must achieve</td>
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<td>Uses hierarchy, systems and standard procedures for co-ordination and control</td>
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<td>Delivered through formal accountability structures</td>
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<td>Threat of penalties/sanctions/shame creates momentum for delivery</td>
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<td>States a collective improvement goal that everyone can aspire to</td>
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<td>Based on shared goals, values and sense of purpose for co-ordination and control</td>
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<td>Delivered through voluntary connections and teams</td>
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<td>Commitment to a common purpose creates energy for delivery</td>
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<td>The goals are a <em>beginning</em> as momentum and resources for change grow out of them</td>
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The “Public Narrative” approach

ref Marshall Gantz
Thanks for listening!

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