St Martins Moving forward together	**Strategy Document**
	Recovery-Focussed Therapeutic Strategy [Psychologically Informed Environments]

Recovery-orientated approach

"There is no single definition of recovery for people with mental health problems, but the guiding principle is the belief that it is possible for someone to regain a meaningful life, despite serious mental illness. In this guideline, it refers to someone achieving the best quality of life they can, while living and coping with their symptoms. It is an ongoing process whereby the person is supported to build up their confidence and skills and resilience, through setting and achieving goals to minimise the impact of mental health problems on their everyday life."

[NICE Guidance, Rehabilitation for Adults with Complex Psychosis, August 2020]

Introduction

This strategy document is intended to outline how staff who are employed in front-line care delivery in our residential service will be expected to engage with service-users to provide individualised, person-centred care through collaboration and shared decision making with service users and their carers involved. Our services are inclusive and available to everyone regardless of age, gender, ethnicity and other characteristics protected by the Equality Act 2010.

The strategy sets out the building-blocks for creating a culture of service-user centred empowerment, skills development, effective intervention, defined care pathways and improved outcomes for service-users leading to quicker step-down from residential services. We recognise that not everyone will return to the same level of independence they had before they developed mental health problems and some people may require ongoing support for a long time.

Our aim is to promote the values of empowerment, inclusion, rights, control and independent living for people with complex mental health needs. We are committed to facilitating and promoting mental well-being, to allow our service-users to return to an independent life in the community in supported accommodation or independent living. We will help people to fulfil their aspirations, whilst providing the support they need to achieve this at their own pace and within a non-stressful environment.

We will engage in a way which 'Makes Every Contact Count' [MECC], a CQC and NICE endorsed evidence-based approach to improving people's health and wellbeing by helping them change their behaviour. Also recognising that Every Moment Has Potential [EMHP], a person-centred Active Support Model approach modelling a way of working that enables everyone to make choices and participate in meaningful activities and social relationships.

Culture of Engagement

Baseline engagement with service-users and the provision of stimulating and therapeutic activity is intrinsically interwoven into the role of every member of the care staff's job descriptions. Meaningful engagement and activity cannot be extracted from the role and given another department or role function. Each operational team member has a part to play in the combined care and therapeutic interventions and successful service-user outcomes.

It is imperative for us to be able to evidence a culture of engagement which maximises the experience and outcomes for service-users through contact with our organisation. Our front-line care staff must therefore consistently provide support at all times which is meaningful, purposeful and useful to the service-user.

Therapeutic engagement will be based on recognised models of care, frameworks for practice and utilise a range of standardised outcome measures. Therapeutic engagement is the primary component of all care interactions and has the capacity to transform and enrich service-user's experiences. With an increased focus on service-user centred care it is imperative for all care staff to therapeutically engage with service-users to improve outcomes in mental and physical health.

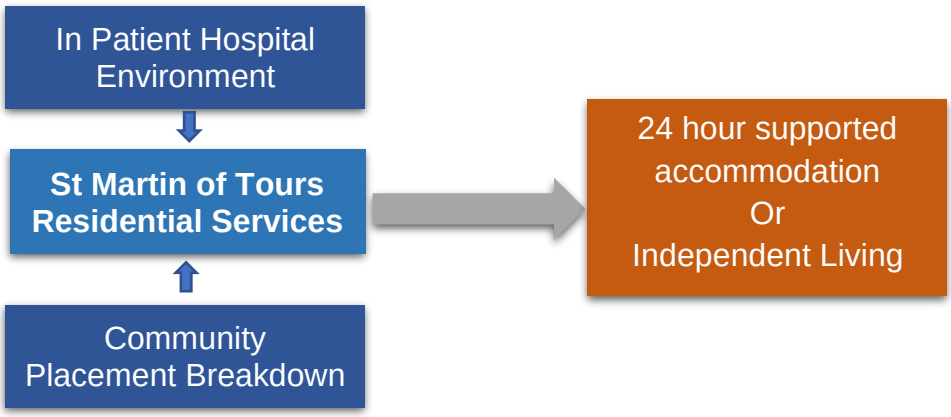
In line with the NHS Long Term Plan to reduce dependence on hospital placements and to increase the range of high-quality community provision St Martins will provide a homely, community-based residential rehabilitation environment for people with complex mental health needs who cannot be discharged directly from hospital to a supported housing placement due to their ongoing high levels of need.

The focus of the service is on facilitating further recovery, optimising medication regimes, engagement in psychosocial interventions and gaining skills for more independent living. The aim of the St Martins residential services will be to enable a transition process to bridge the gap between hospital and supported living for those with complex mental health needs.

Through a positive risk-taking approach intervention with service users will be totally focussed on recovery with the emphasis on discharge from the point of admission to our services "making every contact count".

It has been acknowledged nationally that there are a cohort of people who are in high value hospital placements, who do not require the limitations of a hospital environment, this includes people who remain detained in hospital where a lack of suitable community options are available. Without a suitable residential alternative service they would become vulnerable to increasing risk to themselves or others. These people could receive ongoing care and support in a less restrictive environment which is capable of still meeting their complex mental health needs – this is the intention of the St Martins services.

Additionally, there are a cohort of people whose community supported living placements have broken down because of a mental health deterioration and would ordinarily require a period of detention within a hospital environment. This process of admission is often longer, more expensive and more restrictive. St Martins provide an alternative pathway choice for commissioners between the community and hospital to help prevent hospital admission.



The service will provide a whole systems approach to recovery from mental illness that maximises an individual's quality of life and social inclusion by nurturing their skills, independence and autonomy to give hope and lead to successful community living. The service is designed to provide an active and motivating environment for people with complex mental health needs who cannot be discharged directly from hospital to a supported housing or independent living placement due to their ongoing high level of need.

Location of Services

The focus of our residential services is on facilitating further recovery, optimising medication compliance, engagement in psychosocial intervention and skills development and reduction in risk. The services will maintain a recovery focused philosophy and support the person to set their own recovery goals with support from their keyworker. The model of support is based on principles of partnership to provide dignity, choice, meaningful inclusion, citizenship and empowerment and optimise physical healthcare. The service will encourage skills development and independent living within a supportive environment through positive risk taking in order that the person can lead a more fulfilling life in the community.

Working in Partnership with other agencies

We are committed to working in full partnership with other agencies, making joint decisions and delivering individualised, person-centred care through collaboration. This therapeutic strategy cannot be delivered in isolation by St Martins alone and to attempt to do this would be detrimental to the service-users outcome and experience. St Martins recognise its limitations as an organisation and those of the staff team. Our external partners in the NHS, Local Authority and specialist community organisations are able to provide extensive clinical skills and experience and we value the contribution of our external partners in having a positive impact on the recovery of service-users. Each person will be known to a Placement Review Team and any specialist clinical care should be provided via a multidisciplinary NHS CMHT who will also hold overall clinical responsibility for the service-users mental health while they are living in the community.

As part of this partnership working we have agreed a joint working protocol with a specialist substance misuse services [Better Lives] for those service-users who have substance misuse problems.

Our Goals and Objectives are aligned to those of Islington

- People live healthy, independent lives, with access to good quality care and support when they need it
- People have the skills they need to access and sustain decent housing closer to home
- People feel connected and have as much social contact as they want and opportunities to progress in employment
- People not able to live independently are supported to live well
- People live healthy, independent lives, with access to good quality care and support when they need it
- People have the skills they need to access and sustain decent housing closer to home
- People feel connected and have as much social contact as they want and opportunities to progress in employment
- People not able to live independently are supported to live well
- Residents experience the pathway's shared vision and way of doing things, and it meets their individual needs
- Residents' autonomy is maximised, they are able to thrive and contribute
- Residents are proactively supported to gain the skills necessary to move to an independent tenancy quickly, thereby minimising the time spent living in a mental health accommodation service setting
- People are supported to lead the life they want to live whilst accessing support from the wider network of community offers, friends and family

Engagement in community activities, including leisure, education and work

St Martins will ensure that our service-users are supported to make use of a full range of community activities and engagement opportunities. We recognise that programmes to engage people in community activities should:

- be flexible and make reasonable adjustments to accommodate the person's illness and fluctuating needs
- be individualised
- develop structure and purpose in the person's day
- aim to increase their sense of identity, belonging and social inclusion in the community Rehabilitation for adults with complex psychosis
- involve peer support
- recognise people's skills and strengths.
- Offer people the chance to be involved in a range of activities that they enjoy, tailored to their level of ability and wellness.
- Offer people a range of educational and skill development opportunities, for example, recovery colleges and mainstream adult education settings, which build confidence and may lead to qualifications if the person wishes.
- For people who would like to work towards mainstream employment, we will develop partnerships with voluntary organisations and local employment advice schemes, to increase opportunities for support to prepare people for work or education.

[NICE Guidance, Rehabilitation for Adults with Complex Psychosis, August 2020]

Anticipated Outcomes

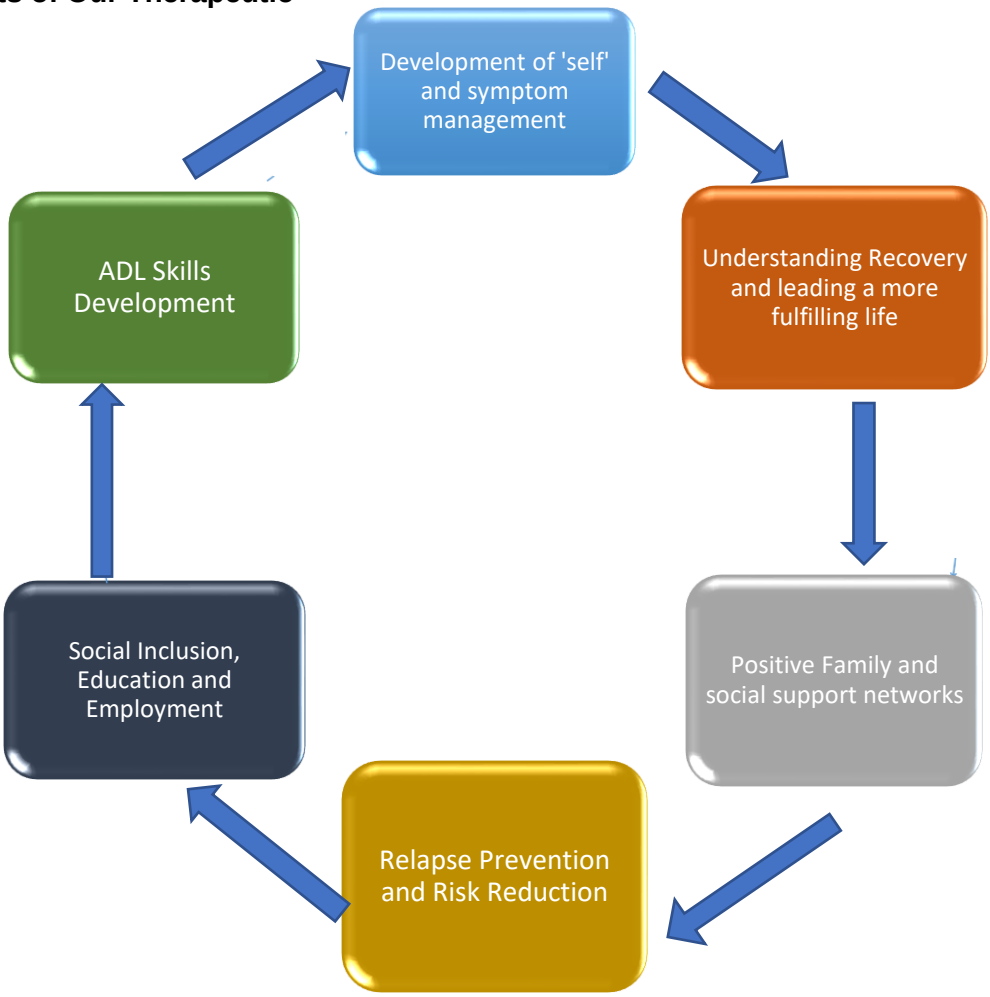
- Reduction in behaviour which challenges
- Reduction in risk
- Improved mental health functioning
- Development of independent and daily living skills
- Better daily structure and routines
- Improved coping strategies
- Increased insight and awareness of relapse indicators
- Decreased reliance upon professional services
- Improved sense of identity, including self confidence
- Physical health improvements
- Increased access to wider community facilities and opportunities
- Increased motivation
- Better medication compliance and ability to manage self-medication
- Improvements in supportive community and family networks
- Improved engagements with primary care services and community mental health team

The St Martins residential services are all based within the heart of the local community which enable opportunity for independent social inclusion and citizenship. The services provide easy accessibility to a wide range of community facilities including local shopping centres, markets, colleges, places of worship, and employment opportunities. All of our services have access to an excellent transport network of buses, tube, overground rail and roads. St Martins will provide support and guidance regarding access these local facilities to ensure that service-users are able to maximise the community opportunities available to them.

We also recognise that accessing community facilities for some service-users may feel stressful. Our staff will fully support people to reduce their anxiety to engage more confidently with the local community.

The core components of our strategy aim to improve the service-user Experience. We understand that people's day-to-day experiences of us has a huge impact on the perceived value of our services. Our reputation is built on our people and we are committed to supporting them to deliver the highest quality care with a compassionate and positive outlook.

Key Elements of Our Therapeutic Strategy:



The 'Therapeutic Modules' in the illustration above identify the main areas of need in terms of successful mental health recovery and represent the key domains of our care and therapeutic delivery.

Meeting Health Needs

Management of Risk – the therapeutic programme will help the service user to manage their own risk more effectively. St Martins will support the service user to recognise their own risk factors and take appropriate action to ensure a positive response to risk which will help to protect themselves from vulnerability and exploitation and protect others.

Physical health - to provide a psycho-educational approach to physical health which includes - diet and exercise, medication management, smoking cessation, management of physical health conditions, dental hygiene and the avoidance of self-neglect. Service users will have full access to a range of primary care and GP services.

We will ensure there is a system to monitor and report people's access to physical healthcare and outcomes that takes into account the increased physical health risks for specific subgroups, for example the higher prevalence of metabolic syndrome and diabetes in people from black, Asian and minority ethnic groups.

A ‘My Health Record’ [ReThink] document will be completed with each person and reviewed on an annual basis to ensure that information is still current.

Chronic and long-term physical conditions – St Martins have a track record of providing care and support to people who have coexisting physical condition alongside a mental illness including those who may have diabetes, asthma, cardiac or respiratory conditions such as COPD. We work in close partnership with NHS primary care colleagues.

Psychological – the service will continue to provide a range of interventions to meet the persons psychological support needs, including programmes for wellness, relaxation, stress and anxiety management. We work in close partnership with external NHS colleagues for support and guidance with skilled psychologically informed programmes.

Reduction in symptoms – it is recognised that service users will continue to have complex mental health difficulties which impact on their mood and ability to function in day-to-day activities. This may include a lack of motivation and other negative symptoms, or symptoms associated with psychotic and neurotic disorders. Service users will have support from a team of staff within St Martins and also externally from the NHS CMHT and other community services, as well as from an individually identified Consultant Psychiatrist who will provide support to lead a reduction in symptoms and improvements in the individual’s quality of life.

Medication compliance – the ability to self-manage medication within the community is an important part of relapse prevention. Using a psycho-educational approach and supervised administration we will support service-users to fully understand their medication, the need for compliance and through a structured approach will safely introduce a self-managed medication programme.

Meeting Social Care Needs

Practical support and guidance – St Martins staff are available to provide support and guidance including adopting a psycho-educational approach to helping service-users learn new skills which will help them to live a more fulfilling life in the community. The Active Support programme will help service users to build on existing skills and develop new ones in preparation for living in the community. St Martins will support people to develop a full range of practical skills including; problem solving, maintaining a safe environment, interpersonal relationships, cooking and self-care.

Employment and Education – the ability to live an independently fulfilling life and remain healthy in the community may be constrained somewhat by the persons’ ability to gain meaningful paid employment. We provide a range of opportunities to acquire educational qualifications, enhance a CV, gain interview experience and participate in voluntary and paid employment.

Preparation for community transition – achieving stepdown to supported/independent living is the ultimate aim of the St Martins services and therefore every effort is made to prepare the service user for life in the community, including, management of finances, budgeting and paying bills, developing social and family networks, citizenship activities and relapse prevention.

Therapeutic Engagement

The St Martins team recognise the limitations of their own skills in relation to the purpose of the service we offer. This therapeutic strategy does not seek to create 'therapists', neither do we seek to provide 'therapy' as this requires specialist expert intervention from qualified professionals who have completed a specific training in delivery of therapy.

Instead, we seek to provide a psychologically informed environment where the day-to-day operation has been designed to take the psychological and emotional needs of people into account, placing people and their individual needs at the centre of what we do.

We expect our staff to work in a therapeutic way with service-users, having meaningful engagement that makes a difference to the person and helps them to progress toward discharge. We expect our staff to hold therapeutic conversations with people we support, sometimes these may use tools such as self-help guides, worksheets and workbooks which are widely available to the general population. The difference in St Martins is that our staff will work in partnership with the service-user to help and guide them through the process of completion of these tools, which it is hoped will have a therapeutic benefit for the person.

We may also use standardised outcome measures to monitor the effectiveness of the therapeutic engagement and support we are providing to individuals. Some typical measures may include: Warwick-Edinburgh and the Schwartz.

Psychologically informed approaches

As referenced in the NICE Guidance, August 2020, our staff will provide brief skills-based interventions that can be delivered by any staff member or service user who has had suitable training in the intervention. They include: guided self-help using online resources or workbooks; relaxation or mindfulness; stress workshops and behavioural activation groups.

Therapeutic Relationship

Therapeutically engaging actions refer to any endeavour, including routine ADL's in which a service-user participates that is intended to enhance their sense of well-being and to promote or enhance physical, cognitive and emotional health. These include, but are not limited to activities that promote self-esteem, pleasure, comfort, confidence, education, creativity, independence and motivation.

All staff members within St Martins services have a responsibility to encourage the development of a strong therapeutic relationship with service-users which encompass caring, supportive and non-judgmental behaviour, embedded in a safe environment. Typically, this type of relationship displays warmth, friendliness, genuine interest, empathy and a desire to facilitate and support. Consequently, therapeutic interpersonal relationships engender a climate for interactions that facilitate effective communication. Building this positive relationship will commence during the transition phase and will enable the service-user to feel more confident and relaxed during the admission stage which can potentially feel quite stressful for the individual.

Successful therapeutic interpersonal relationships between care staff and service-users are associated with improvements in levels of satisfaction, reduction in incidents, adherence to care support, quality of life, reduced levels of anxiety and improvements in overall health and wellbeing.

St Martins expect all staff to display leadership behaviours in their interactions with service-users. Some examples of leadership behaviours include; guiding, supporting, nurturing, encouraging, creating opportunities for self-development, mentoring, coaching and celebrating achievement.

At St Martins we seek to use the principles of therapeutic engagement and leadership as a way to define how care staff spend quality time with service-users and aim to empower the service-user to actively participate in their care. We use therapeutic engagement to provide meaningful and purposeful structured activity which has been planned with the service-user and is based on meaningful identified aims and objectives.

St Martins staff should build on people's strengths and encourage hope and optimism by:

- helping people choose and work towards personal goals, based on their skills, aspirations and motivations
- developing and maintaining continuity of individual therapeutic relationships wherever possible
- helping them find meaningful occupations (including work, leisure or education) and build support networks using voluntary, health, social care and mainstream resources
- helping people to gain skills to manage both their everyday activities and their mental health, including moving towards self-management of medication (see the recommendations on helping people to manage their own medicines)
- providing opportunities for sharing experiences with peers
- encouraging positive risk-taking
- developing people's self-esteem and confidence
- validating people's achievements and celebrating their progress
- recognising that people vary in their experiences and progress at different rates Rehabilitation for adults with complex psychosis
- improving people's understanding of their experiences and the support that may help them – for example, through accessible written information, face-to-face discussions and group work.

[NICE Guidance, Rehabilitation for Adults with Complex Psychosis, August 2020]

Recovery Support Worker/Keyworker Engagement - Whilst it is recognised that the support staff employed at St Martins are not trained therapists it does not preclude them from providing structured support from a ‘self-help’, psychoeducational perspective, providing guidance and support to service-users to grasp the basic concepts at an introductory level covering a range of therapeutic areas.

We are fortunate to have many very competent and skilled support staff working in the organisation who are keen to work in partnership alongside service-users to make a positive difference to their lives, which includes working in a therapeutically engaging way.

St Martins are committed to upskilling the staff team to ensure that this therapeutic strategy is fully embedded into the culture of the organisation. A programme of informal and formal training and mentorship will be rolled out across 2021 to ensure that our staff are equipped with a baseline understanding of therapeutic engagement including basic skills in areas such as; CBT, principles of Recovery, supporting people to reduce their own risk, helping people to set goals and working with people who lack motivation.

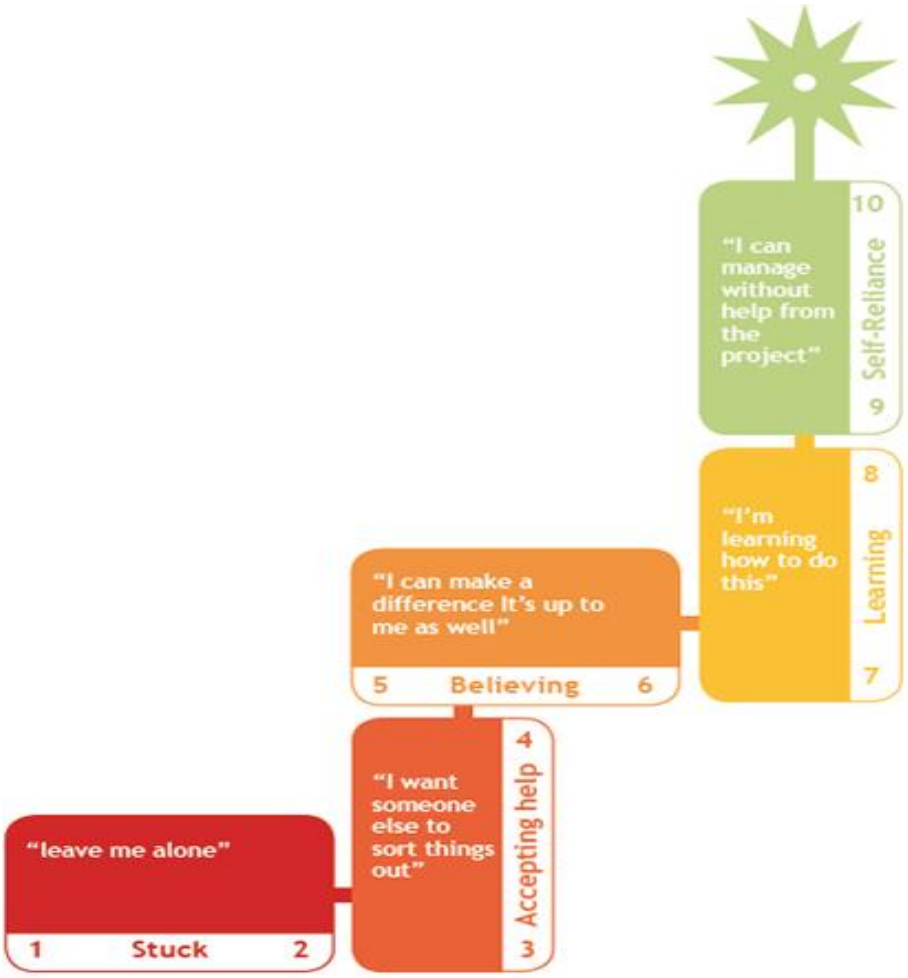
All service-users will be offered regular 1:1 sessions with their keyworker to help the person to plan and review their own recovery goals. These sessions can also be used as an opportunity to discuss their overall wellbeing and to work together to complete focussed therapeutic work.

LifeSkills Facilitator Engagement - In addition to our Recovery Support team St Martins also employ LifeSkills Facilitators in all residential services. The Lifeskills Facilitators will be equipped with tools and resources to facilitate a range of therapeutic 1:1 and group sessions. Some of these sessions require more precise preparation ahead of delivery and are at a slightly higher technical level in terms of content. Some of these therapeutic sessions may include:

- Principles of managing anger more effectively
- Helping to manage anxiety
- Supporting people to be more assertive
- Problem Solving
- Substance Awareness [in partnership with Better Lives]
- Hearing Voices
- Confidence Building
- Learning to Live with Schizophrenia
- Helping to increase motivation
- Relapse Prevention
- Relaxation and Arousal Reduction
- Becoming more self-aware
- Building on social and life skills
- Being able to manage stress more effectively
- Healthy Living
- Education

Ladder of Change

We need to find better ways of working with service-users who are disengaged from their recovery or who are at stage 1 of the ladder of change – it is not acceptable to simply dismiss these individuals as ‘unmotivated’ or ‘too unwell’. At the beginning of the recovery journey service-users are less inclined to be thinking about or discussing aspects of their lives or considering strategies to improve their mental state functioning.



Activities of Daily Living

The St Martins Activities of Daily Living (ADL) assessment is divided into 20 areas of daily activities. This assessment is completed by the Keyworker within the first 4 weeks of the service-users admission and provides a baseline of daily functioning in a wide range of areas of the persons life. The information obtained from this assessment is then used to create meaningful individualised support plans aimed at increasing skills in areas of daily living where improvement could be useful for the service user. The ADL assessment is completed every three months to measure progress and overall improvement.

Holistic Care

Holistic care is characterised by the engagement with the person as a whole and recognises that the person is far more than 'just a person with a mental illness'. Support and engagement goes way beyond the disability and views the service-user in a person-centred way with specific individual needs and preferences. Holistic care can be illustrated in a number of domains within a model. All activity has an underlying therapeutic purpose and value, even if this is not immediately apparent and how simple the activity may seem. Every activity meets one or more of the service-users needs and is integrally linked to the outcome;

The 12 domains of the holistic care model are as follows:

- Physical
- Family
- Recreational
- Emotional
- Social
- Educational
- Sensory
- Creative
- Mental/Psychological
- Spiritual
- Cultural
- Environmental

Recovery Strategy

It is our aspiration within St Martins to support people to recover and achieve the best possible state of health and wellbeing that they can. Recovery means enabling people to find ways of living meaningful lives with or without on-going symptoms of their condition.

Our recovery strategy needs to underpin everything that we do and therefore it is fundamental for all of our staff to detailed understanding of the principles of recovery and ways in which they can contribute to an individual's recovery. Our staff team will be required to find new, pro-active and innovative solutions to support service-users to achieve recovery that's meaningful to them.

We will use nationally recognised guidance, produced by The Sainsbury Centre for Mental Health and MIND and Rethink, to inform our recovery strategy within St Martins. Much of this work was developed previously as part of a national, government driven, pilot scheme called ImROC (Implementing Recovery Through Organisational Change) aimed at improving services which provide care and treatment to people with a mental illness. These documents include:

- NICE Guidance (August 2020) Rehabilitation for Adults with Complex Pyschosis
- 100 ways to support recovery: A guide for mental health professionals (Rethink)
- Enabling recovery for people with complex mental health needs: A template for rehabilitation services (Royal College of Psychiatry)
- Implementing Recovery: A methodology for organisational change (Sainsbury Centre for Mental Health)
- Making Recovery a Reality (Sainsbury Centre for Mental Health)
- Guidance for commissioners of rehabilitation services for people with complex mental health needs (Joint Commissioning Panel for Mental Health)

Mental Health Recovery Star Headings

The main headings of the Recovery Star are used within all care/support planning at St Martins Residential services and follow the format of:

- Managing Mental Health
- Physical Health and Self-Care
- Living Skills
- Social Networks
- Work

- Relationships
- Addictive Behaviour
- Responsibilities
- Identity and Self-Esteem
- Trust and Hope

Support plans will be written in collaboration with the service-user and include the persons own recovery goals and clarify actions and responsibilities for staff and the person themselves. Support plans will be updated in response to any changes in the persons needs. The support plan must be shared with the service-user and they will be provided with an opportunity to retain a copy of the support plan for personal reference.

Recovery Intervention

Within our St Martins services we will provide activities to help people with complex mental health needs to develop and maintain daily living skills such as self-care, laundry, shopping, budgeting, using public transport, cooking and communicating (including using digital technology). We will support people to engage in activities to develop or improve their daily living skills and enable them to practise their skills in risk-managed real life, such as kitchens and laundry rooms.

Substance Misuse

We will work in partnership with specialist substance misuse services to support people who have substance misuse problems. Substance misuse interventions aim to:

• support harm reduction
• change behaviour
• help people develop coping strategies
• improve engagement with substance misuse services
• prevent relapse.

St Martins have a separate substance misuse strategy which should be read in conjunction with this document, which includes a joint working protocol between Better Lives and St Martins.

The key principles of recovery appertain to:

1. Creating and sustaining a culture of hopefulness that is focused on the pursuit of personal goals and ambitions;

2. Supporting people to take responsibility and maintain a sense of control over their own lives and symptoms;

3. Opening up opportunities to build a positive identity and a life beyond illness.

At St Martins we want to embed recovery-orientated services and practices within our services. This will be achieved by developing the necessary infrastructure to support whole

system change (i.e. policies, processes and skills development) and creating the leadership to drive our commitment forward.

At a service level, we expect all our staff and teams to display attitudes and behaviours that support people in their journey towards recovery.

We will develop service-user-held care plans, and wellbeing and recovery portfolios that are collaboratively produced with service users focussing on strengths, positive goals, social roles, relationships and health promotion.

We need to promote better access to community opportunities. Our goal is to support recovery and wellbeing by promoting and strengthening community networks. This means knowing what community resources are available and how to access them.

Our recovery-orientated residential services will look at individual needs and help people reach their full potential. We will provide services that are accessible, person-centred and responsive to the often complex needs of individuals.

St Martins will follow the organisational recovery strategy outlined in the document *Implementing Recovery: A framework for organisational change* (Sainsbury Centre, 2010) which presented a framework for organisational change consisting of 10 key challenges that need to be addressed by mental health services if they are to move towards becoming more recovery-oriented.

It was developed from a series of workshops held in five mental health trusts which identified the ways in which recovery principles could best be incorporated into routine practice. The workshops were attended by more than 300 health and social care professionals, managers and representatives from local independent organisations. They also had extensive input from service users and carers.

The 10 Key organisational challenges for St Martins are identified as being:

1) Changing the nature of day-to-day interactions and the quality of experience
2) Delivering comprehensive, user-led education and training programmes
3) Join established Recovery Colleges to access wider specialist therapeutic courses
4) Ensuring organisational commitment, creating the ‘culture’. The importance of leadership
5) Increasing ‘personalisation’ and choice
6) Changing the way we approach risk assessment and management
7) Redefining user involvement
8) Transforming the workforce
9) Supporting staff in their recovery journey
10) Increasing opportunities for building a life ‘beyond illness’

We will work in partnership with NHS and Local Authority colleagues to develop an integrated strategy which tackles our plan for fully meeting each of the 10 organisational challenges using the methodological approach suggested in the document *Implementing Recovery: A framework for organisational change* (2010)

The documents advocate for 3 levels of organisationally driven Recovery focussed engagement. Whilst there is a lot of work to do St Martins aspire to be at Stage 2 by the end of 2021 and Stage 3 by the end of 2022.

Definitions for the three-stage classification [Implementing Recovery; a methodology for organisation change]:

Stage 1: Engagement

The organisation is clearly engaged in its intent to deliver recovery-oriented services. At a Board level there is an acknowledgement and ownership that the organisation needs to change towards more recovery-oriented services. There is an awareness of existing good areas of practice and the commitment to build on these. Plans to deliver recovery-oriented services have been agreed and a timetable for implementation is in place, but there has been little progress as yet.

Stage 2: Development

Action is being taken with some evidence of significant developments in practice, policy and culture. Good progress is being made in delivering recovery-oriented services in some areas, but this is not consistent throughout the organisation.

Stage 3: Transformation

The vision for achieving significant change has been fully realised. The necessary policy, processes and practice to deliver a recovery-oriented service are embedded at every level of the organisation – from Boards to teams and front line workers. There are processes in place to achieve continuous improvements based on learning from ongoing review. The organisation works proactively with a range of other partners in supporting positive mental health and wellbeing.

Our services aim to work with people to help them acquire or regain the skills and confidence to live successfully in the community. We focus on addressing and minimising the symptoms and functional impairment that people may have, with an emphasis on achieving as much individual autonomy and independence as possible.

This includes optimal management of symptoms, promotion of activities of daily living and meaningful occupation, screening for physical health problems and promoting healthy living, and providing support and evidence based interventions to support carers.

Achieving organisational transformation:

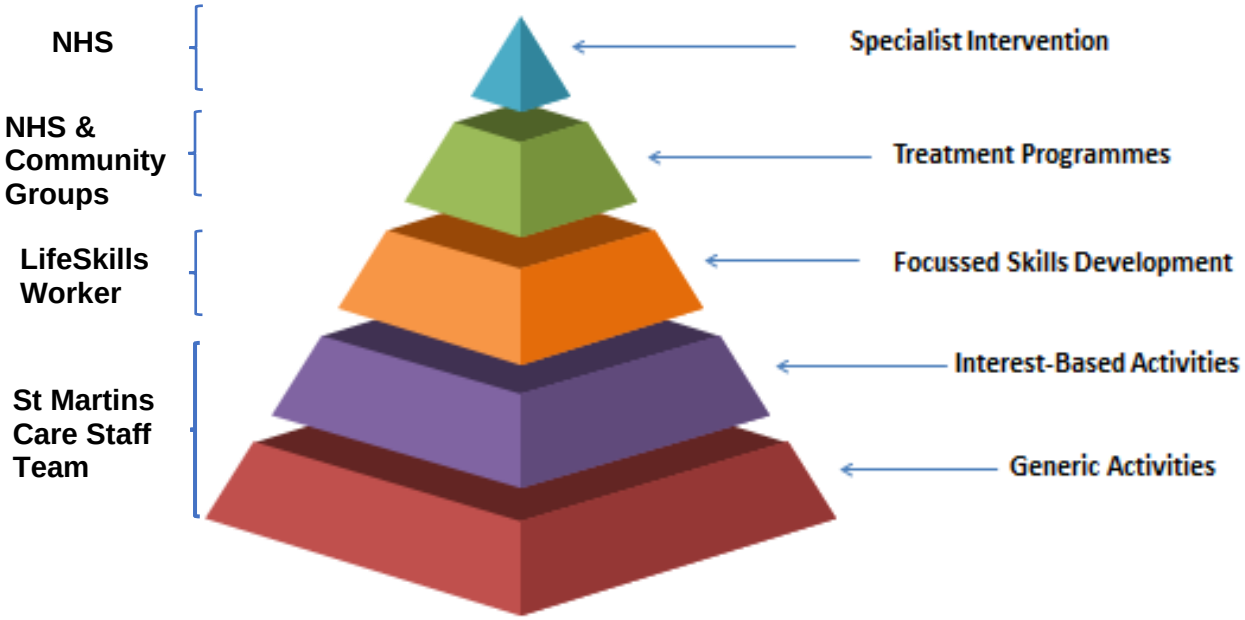
We will establish a co-produced working group in the early part of January 2021. The group, which will consist of Service-Users, directors, managers and front-line staff will be responsible for identifying actions to move the organisation to a position where Recovery is fully embedded at every level as seen in the Stage 3: Transformation.

Additionally, we will facilitate a number of sessions of front-line staff engagement in relation to this strategy, a recovery culture and organisational change. We will also deliver a series of co-produced training session for front-line staff commencing in January 2021 in relation to Recovery.

Meaningful therapeutic engagement will be a standing agenda item in team meetings, staff supervision and managers meetings. It will form part of the audit and governance process.

Multi-Layered Therapeutic Approach

The pyramid model illustrates the multi-layered therapeutic engagement strategy which is available in St Martins services. The tiers represent five inter-connecting layers of engagement which should be accessible to all service-users and delivered by a range of internal care staff, LIkeskills Workers, NHS core services and Care Coordinators, and specialist community providers.



Generic Activities

At the most basic layer of the pyramid are non-specific, generic programme which are available to all service users on a weekly basis and are intended to provide baseline approaches to engagement. The activities do not require a high level of skill of the staff member to facilitate neither do they require great mastery of skills from the service-user to participate. Examples of generic activities may include:

- Quizzes
- Board games
- Going for a walk
- Current affairs group
- Relaxation
- Breakfast Club
- Baking
- Karaoke/singing

The Generic therapeutic programme will be able to evidence that a minimum of 25 hours structured individual, unit-based, therapeutic engagement is offered per week.

Where service-users are offered but decline to participate in a structured programme or 1:1 session this must be recorded as it provides evidence of input being available and offered, even if the service-user chooses not to engage.

Programme Layers (Inward and Outward Focussed)

It is important to this strategy that opportunities are available for everyone regardless of mental state or ability. Generic baseline programme/activities, such as the one illustrated below can help to build motivation, engagement and therapeutic relationships. An example of a basic 25 hour generic programme may be constructed as follows:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning	Breakfast Club	Exercise Group	Motivational games	Community Meeting	Domestic skills activity	Model Making	Creative Writing
Afternoon	Current Affairs	Healthy Living	Daily Living Skills	Computer Awareness	Cooking and Baking	Walking Group	Gardening Group
Evening	Exercise Group	Mindfulness Relaxation	Art and Craft	Quiz	Film Night	Board Games	Karaoke/

With a similar programme as above being offered to service-users in all St Martins residential service it demonstrates a commitment to providing inclusive unit-based activity as part of the overall recovery programme.

This baseline programme is then overlayed with individual person-specific recovery focussed intervention Interest-Based Activities (outward, community focussed) and Focussed Skills Development programmes to provide a comprehensive and meaningful recovery experience for the individual person.

Our Islington Services should also form close links with the Camden and Islington Recovery College where service-users can access a wide range of specialist courses and programmes.

Individual 'Interest-Based' Activities

Based on information acquired through the completion of the Interest Checklist, Pre-Admission assessment, discussions with the service-user and information from other assessments and sources it is possible to build up an initial profile of the service-user's likes and interests – this can expand over time as we learn more about the individual service-user and their list of interests increases. At this layer of the pyramid it is possible to begin to explore the service-user's own goals and aspirations in terms of improving their skills through activities which they already enjoy. Examples of individual interest-based activities may include:

- Access to community projects
- Community volunteering
- Cooking and Baking

- Art and Craft
- Riding a bike
- Swimming
- Fishing
- Walking
- Photography
- Learning and education at local colleges
- Access to leisure centre
- Story writing/poetry
- Shopping
- Work Placements
- Gardening
- Exercise/fitness
- Model Making
- Playing a musical instrument

Focussed Skills Development

From information obtained through the individual service-user ADL Assessment it is possible to provide focussed service-led engagement, facilitated using the existing skills, knowledge and experience of the Lifeskills Facilitators and care staff as role models. The purpose of skills development is to either support the service-user to learn new skills which can improve quality of life and functioning or maintain existing skills or to relearn skills.

- Self-Esteem and Confidence Building
- Health Promotion
- Managing daily finances and budgeting
- Living Skills
- Personal Care Skills
- Building positive relationships with others
- Simple problem solving
- Managing risks in the community – road awareness, keeping yourself safe, etc.

Treatment Programmes

Treatment programmes are *not provided by St Martins but delivered in partnership with NHS and specialist Community Groups, including the Camden and Islington Recovery College*

Service-users will be referred to treatment programmes by our NHS CMHT partners or occasionally via a GP where there is an individual identified need. Treatment programmes are deigned to positively impact on specific areas of the service-users presentation directly associated to the symptoms of their mental illness or diagnosis, which should be linked to the care plan and treatment goals. Where there is an identified need these programmes will be facilitated by suitably trained and experienced clinicians through the NHS CMHT or links with specialist community providers/groups.

The focus of treatment programmes is on empowering individuals, developing confidence, and helping people overcome barriers that are limiting their ability to live full and satisfying lives. We will support service-users to fully engage with treatment programmes and encourage them to attend and fully engage in sessions which are offered through the NHS.

Our goal as an organisation is to enable as many people our care as possible to develop or re-develop their social, educational and vocational skills. The ultimate aim is to help them progress to a more positive future and, where possible, successful semi-independent or independent living.

Specialist programmes

Some service-users with the most complex behaviours, such as those service-users with treatment resistive conditions, Personality Disorder, or those with comorbidity or a dual-diagnosis of mental illness and Learning Disability may benefit from a programme of specialist treatment and engagement. Examples of individual specialist programmes may include those provided through programmes such as: individual psychology or psychiatry provided via the NHS.

Service-user Engagement

A key part of our recovery strategy is to ensure the service-user 'has a voice' and is central to the development of our organisation. Each individual St Martins service will be able to provide evidence that service-user engagement and co-production is a high priority for the service. This engagement will be integral to the day-to-day functioning of the service and will include service-user engagement in many of the operational areas, which may include;

- Appointing a service-user representative to the St Martins Service-User Council
- Buddying other Service-users
- Interviewing new staff
- Involvement in Staff Training
- Facilitating Service-User led audits
- Providing 360 degree appraisal feedback as part of staff performance reviews
- Coproduction of new initiatives and service developments
- Advocating on behalf of the service-users during PQRM/Governance Meetings
- Chairing local service-user forums/community meetings
- Contribute to reports for the St Martins Board on behalf of Service-Users

Task-Focussed Working, Avoiding Institutionalisation and Dependence

When care staff work in a task-focussed way they are essentially viewing their own role as a set of tasks which need to be completed, but not having an emotional attachment with the service-user.

Task focused working can detract from person-centred engagement. Working in a task focussed way is unrewarding for both the staff member and the service-user. A task-focussed approach to care is likely to have a negative impact on the mental and physical health of some service-users and lead to an increase in difficult and complex behaviour. It will also create learned dependence and institutionalisation causing the service user to quickly become deskilled.

It is therefore important that staff in our service work in a way, at all times, which maximises the opportunities available for service-users and to stimulate engagement with care staff to ensure the service-user receives the treatment, supportive intervention and rehabilitation they require leading to improved outcomes and quality of life.

Therapeutic engagement is an integral part of all roles including nursing and care staff. It is important to ensure that dependence is not created because of the care which is being done 'to' and not in collaboration 'with' the service-user. Therapeutic engagement is not a task it is an opportunity to connect with the service-user in a meaningful way.

Recovery Strategies

By supporting a culture of therapeutic engagement based on principles of Recovery the care we provide will be adopting values including; Encouraging service-users to build hope, supporting service-users to set their own goals, providing engagement based on what the service-user would find meaningful, supporting the service-user to lead a more fulfilling life.

Recovery is about building a meaningful and satisfying life, as defined by the person themselves, whether or not there are ongoing or recurring symptoms which cannot be treated or cured. Therapeutic engagement should be aimed at supporting the person to reach their maximum potential as defined below:

Hope - is a central aspect of Recovery as Recovery is impossible without hope. It is essential to sustaining motivation and supporting expectations of an individually fulfilled life.

Agency - refers to people gaining a sense of control. Recovery means service-users taking control over their own problems, the service they receive and their lives. It is concerned with self-management, self-determination, choice and responsibility.

Opportunity - links recovery with social inclusion and thus peoples' participation in a wider society, to be a valued member of and contribute to those communities; and have access to opportunities that exist within those communities.

Principles of Active Support

A simple, but highly effective framework on which to base therapeutic engagement is through the application of principles derived from the Active Support Model. The goal of Active Support is to ensure that people with even the most significant disabilities have ongoing, daily support to be engaged in a variety of life activities and opportunities of their choice.

Engagement in a full range of activities is part and parcel of everyday life. Basic requirements for a full life are the opportunities to: participate in the full range of activities that everyone else does; be involved and share interests with other people; develop relationships, skills and experience.

When a person is not able to do typical activities independently as a result of their mental health, lack of skills or knowledge then they will require support to help them. Active Support is designed to make sure that people who need support have a chance to be fully involved in their lives and receive the right range and level of support to be successful.

There are four underpinning principles to person-centred Active Support which are detailed below:

Principle One: Every Moment Has Potential

- Everyday there are countless opportunities for service-users to be engaged in a wide range of naturally occurring activities and interactions
- Using these real and naturally occurring opportunities for engagement reduces the need to create artificial activities
- The challenge is to find more and more opportunities for service-users to be involved.

Principle Two: Little and Often

- Everything that happens throughout the day is made up of smaller parts or steps.
- People may be more willing to get involved in small parts of an activity rather than the whole thing
- Engagement for some people means initially joining for 5 minutes and then building up over time.

Principle Three: Graded Assistance

Every person is an individual with their own support needs. Graded assistance is about giving just the right amount and type of support to enable a person to succeed in a task or social interaction.

- Service-users need the right support at the right time
- Too much and they will be over supported and too little and they will be unsuccessful and less likely to try again or trust someone again to support them
- Most people will need more support initially in a new activity then less support as they learn new skills required to complete the activity.
- There are many types of assistance: verbal prompts, hand-over-hand, verbal guidance

Principle Four: Maximise Choice and Control

- Means supporting people to make as many choices about how they spend their day as possible. The more choices a person can make the more control they have.
- Experience and choice go hand-in-hand. The more experiences a person has, the more alternatives have to choose from. When a person you are supporting makes a choice, it is important that, so fare as possible, you respect their choice.
- Supporting people with complex disabilities to make choices can be difficult. Often people may not understand what choices are being offered or the word you are using.

How to Support Engagement

It is easy to tell when someone is engaged in doing something. Typically they will be actively participating in an everyday pursuit, such as communicating with another person, concentrating on something of interest or using their hands to complete a task or produce something. Everyday life is full of opportunities to be actively engaged. The goal of full engagement is equivalent to leading a full life.

The level of support provided is matched directly to the person's needs for support in each activity, always making it person-centred in practice. While the support provided has to be enough, the aim is to promote the person's independence by giving only as much support as is needed. Assistance is gradually faded out as practice makes the person more skilled.

Active Support Plans (Task Analysis)

Information obtained from the completion of the ADL Assessment will be used to develop an Active Support Plans (Task Analysis) based on areas identified within the assessment indicating an area of need and requirement for ADL skills development.

Task Analysis provides a simple structure to use when supporting the service-user achieve a new skill. It uses a process of breaking an activity down into smaller steps.

The staff member works alongside the service-user to master each component part until the service-user becomes totally competent in the whole activity – or as much of the activity as the service-user is capable. This part of active support works at the service-user's own pace and celebrates achievement of each component part - rather than only celebrating total achievement and mastery.

This way of working is highly motivating for the service-user and also for the staff who support them. It provides a genuine sense of achievement and helps the service-user to develop new independent living skills.

Senior Leadership Team Commitment

This therapeutic engagement strategy outlines the commitment of the St Martin of Tours Senior Leadership Team to provide an environment in which service-users can realise their own potential through recovery-focussed support from a skilled and compassionate team of staff.

This strategy is also a commitment from the Senior Leadership Team to promote a culture of engagement and coproduction where service-users and staff work together in partnership to maximise every opportunity for recovery and improved outcomes.

The Senior Leadership Team are also committed to ensuring that the individual services work in full collaboration with other partnership agencies within the NHS, Local Authority and specialist community organisations to deliver the best possible recovery service to the individuals who are supported by our organisation.

Above all else, the Senior Leadership Team are committed to ensuring that the organisation makes a genuinely and positive difference to the lives of service-users and that through contact with our organisation they are able to lead a more fulfilling life as an active member of their community.

Andrew Frankel-Caine
Interim Head of Operational Services