Mental Health Innovation Fund (MHIF): Improving responses to distress through creating a “no wrong door” approach

Authors: Dr Suzan Aydinlar, Counselling Psychologist, Mrs Anna Quinn, Mental Health Practitioner, Mrs Emma Boyd, Trainee Clinical Psychologist & Ms Jennifer Lai, Trainee Clinical Psychologist

Background:
Mental health services in Lanarkshire have made considerable progress in shifting the balance of care from hospital to community and in developing a range of community supports and interventions for people in Lanarkshire who have mental health problems.

Within Lanarkshire, it is acknowledged that there is a need to improve responses to psychological distress, through improving collaboration between agencies and services, including the Third Sector.

The Scottish Government Mental Health Innovation Fund (March 2015 to March 2018) was outlined for:
• Developing new and innovative approaches and
• Working with partners and boards to develop better ways of helping people in distress – including those who are at risk of self harm or suicide

Aims:
To establish a mechanism for improving cross agency responses to people presenting to services in distress. This “no wrong door” approach will require capacity building across settings through building confidence, competence, and knowledge in those at point of first contact. This will result in a safe, effective, immediate, and person-centred response, connecting people with the right support at the right time. And in doing so, reducing the requirement for people to use emergency services as a route of access to support and intervention for stress and distress.

Tests of Change

SAMH Mental Health Link Workers
Mental health link workers are deployed in over 40 GP practices across NHS Lanarkshire with a view to commissioning a link worker service as part of the overall suite of commissioned mental health services.

LAMH Crisis Service
This support is for people who are known to mental health services and who are experiencing crisis related to mental health regardless of their diagnosis. Crisis support is available: Monday to Friday 5pm-10pm and Saturday and Sunday 10am-10pm.

NHS COMPASS DBT Groups
DBT skills groups are psycho-educational groups that run weekly for two hours. Four modules are covered within the DBT Skills groups: core mindfulness, distress tolerance, emotion regulation, and interpersonal effectiveness.

The overall goal of DBT skills group is to help individuals change behavioural, emotional, thinking, and interpersonal patterns associated with problems in living.

The COMPASS team ran two DBT skills groups within NHS Lanarkshire and one in the Third Sector between November 2017 and February 2018.

Distress Brief Interventions (DBI)
Funding is being used to supplement and enhance the DBI level 2 service. This extra funding allows for greater reach and spread of DBI across North Lanarkshire.

A DBI is a time limited and supportive problem solving contact with an individual in distress. It aims to provide compassionate responses to individuals in distress by front line staff, and community-based problem solving support, wellness and distress management planning, and signposting (see http://www.dbi.scot for more info).

Development Officer
The Development Officer post, via VASLAN/Lanarkshire Links, focuses on community capacity building, partnership working and co-production in mental health improvement.

NHS COMPASS Skills Training Workshops
Workshops were delivered to Psychological Therapies Teams, Community Mental Health Teams, psychiatric in-patient services, and the third sector within NHS Lanarkshire. Attendees included community psychiatric nurses, clinical and counselling psychologists, psychiatrists, occupational therapists, charge nurses, and support workers.

A total of 171 members of staff across services attended these workshops. %77 rated the workshops as “excellent” and %33 rated the workshops as “good”.

Evaluation & Conclusion

DBT Skills Groups:
• 101 referrals were received to DBT skills groups run by the COMPASS team and 66 were offered a place on one of the groups.
• 71% of individuals who completed the group showed improvements on measures of psychological distress.
• 100% of group participants reported a reduction in the frequency of their self-harm behaviours since attending the group.

• Evaluations for other services are on-going, however, early indications are positive.

Conclusions:
• The MHIF was used to fund and support a range of different services within the NHS and Third Sector via North and South Lanarkshire Council. These different services aim to connect people with the right support at the right time and create a “no wrong door” approach.

• Through quarterly MHIF steering group meetings, information sharing and joint working was ensured, improving cross agency responses to people presenting to services in distress.

• Skills training workshops were offered to a diverse range of services, building confidence, competence, and knowledge of working with people in psychological distress.

• Evaluations of the DBT skills group indicate a reduction in psychological distress and self-harm behaviours, suggesting that this innovative approach could reduce the requirement for people to use emergency services as a route of access to support and intervention.