

Recovery Coaches

Service User Consultation

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Cambridgeshire and Peterborough Clinical Commissioning Group

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Introduction:

The Cambridgeshire and Peterborough Clinical Commissioning Group (CCG) have developed a service, namely the Recovery Coach Service for adults aged between 17-65 who are identified as users of NHS adult mental services within Cambridgeshire and Peterborough and who are registered at a GP surgery. *

The service will also accept and work with individuals with a 'dual diagnosis' (e.g. mental health issues coupled with drugs and/or alcohol issues)

The service is not appropriate for people who are in a crisis or who are at risk of self harming or harming others.

The NHS mental health teams will refer to the Recovery Coach Service up to 6 weeks prior to discharge from services, and the Recovery Coach will support the person to put appropriate support in place prior to discharge.

The Recovery Coaches and their peer support workers will work actively with the individual liaising with voluntary organisations and the local community for up to a maximum of four weeks to promote recovery.

Support will take place in a variety of ways e.g.: 1:2:1, groups, and with a variety of approaches to enable individuals to feel involved and in control of their recovery, e.g.: identifying strengths, setting realistic goals.

The service can also support the person to re-access mental health services.

* If an individual is not registered with a GP and live within the boundaries of Cambridgeshire County Council or Peterborough City Council they can still access the service.

Consultation:

The SUN Network has been able to consult with 10 individuals about the Recovery Coach Service to gain their views. Demographics were not obtained for this consultation, and we asked the following questions:

- What are your views on the Recovery Coach Service (e.g. how do you feel it could help you or someone you know when they are discharged from NHS mental health services?)
- What are your views/opinions of Recovery Coaches being based in voluntary mental health services
- Their recovery from mental health issues?
- What are your views on the Recovery Coach Service helping people to re-access NHS mental health services?

The responses were as follows:

What are your views on the Recovery Coach Service (e.g.: how do you feel it could help you or someone you know when they are discharged from NHS mental health services)?

- 🏷 It would make me feel less alone.
- It's a very good idea because awareness of things to help recovery wasn't provided to me by my GP or IAPT therapist (amazingly). I had to stumble across these through leaflets in the Richmond Fellowship office. The only concern is that the support is limited to 4 weeks. Personal experience suggests that this is not enough. Partly because the services that people access wouldn't always improve the person's situation successfully enough for them to be on such a short road to recovery. It is too easy to fall out of the system if you are not being monitored and become very ill.

- 🅸 Not sure how 'skilled' these people will be at REALLY helping me.
- A brilliant idea. Will give a sense of being cared about after initial discharge from NHS services.
- b Good idea.
- It will continue the STR (Support, time and recovery) role into the community which would be great to have someone alongside you when you are discharged as discharge comes all too quick.
- Solution of the service of the servi
- This may assist people be clearer at finding a way forward towards relevant opportunities away from MH services with a way back in if needed. Concerned that 4 weeks support will not be long enough.
- Could benefit some, however, those with fluctuating mental health issues would still be left wanting, and does it help sort out SU's finances and benefits?
- Sconcerned 4 weeks is too short. And can the person self refer or is it their care plan co-ordinator? Is it a shared decision?

What are your views/opinions of Recovery Coaches being based in voluntary mental health service?

- Sood idea as it bridges the gap between NHS services and the person in recovery
- They should be based in the 'main' local charities: Mind, Lifecraft etc. and not stuck out at Fulbourn. No-one wants to go there!
- 🏷 Should be part of the NHS service.
- 🏷 How will this be managed?
- Away from NHS will help foster independence, socialising and getting to know others on their recovery journey.

- I would prefer not to meet in a mental health setting. I would be concerned that these arrangements were effectively formalised so that there was always clear access as required.
- As long as the coach had a good knowledge, understanding and links into stat services then good, although it sounds similar to what STR in statutory services do.
- It's nice that they are not based in clinical settings, but think the bases need to be equitable across the county.

How do you feel that the Recovery Coach Service could help people in their recovery from mental health issues?

- * Think this is a good idea to bridge the gap between services and the community that people often struggle with. The only concern is what will be the criteria? It isn't clear at present and could be subject to objectivity.
- Be alongside, empathise, recovery tools personalised to the individual, offer intense or low support to enable social inclusion.
- Focusing on recovery, individual strengths, and access to opportunities in a wider community, a helpful move away from the medical model, more hopeful and less stigmatising.
- 🏷 Reduce anxieties.
- If the coach has good knowledge and relationship with organisations this will be helpful. 4 weeks directly after discharge is too short.
- 🏷 Help not to feel alone and know what is out there.
- 🍄 I don't think I would need them.
- 🕸 Recovery process can take a long time.
- Recovery coach could be that special person who listens and understands and gives that helping hand to make the person in recovery feel that they are human and part of society again.

What are your views on the Recovery Coach Service helping people to re-access NHS mental health services?

- 🎸 Great idea.
- Preferably to the GP who knows very little about mental health.
- Awareness of what is available to help as my GP didn't know and the NHS doesn't automatically know. Monitor improvement, have the time to give information.
- Helpful for those that do not wish to engage with their GP as the recovery coach would notice changes in the person behaviour that the GP may miss.
- This could lead to a far less stressful time of ill health, and hopefully a quicker and more effective referral than the current process, but would require excellent liaison skills between recovery coaches, family, statutory and voluntary services and full permission for a 'what if' plan agreed by the client from the outset.

Conclusion:

The general consensus of the respondents is that they welcome the idea of the Recovery Coach role, and see numerous benefits, but it also raises the following questions and concerns:

- Will they have excellent working knowledge of statutory and voluntary services?
- 🏷 Is it too similar to the NHS STR role?
- The work of the will actually be allocated per person per week?
- 🏷 What are the criteria?
- 🏷 Why will they not work with crisis or self harm?
- 🏷 How will it be managed?
- S Can people self refer? Or refer back in after the 4 weeks?
- 🏼 Is it optional?
- Can they arrange a monthly drop in support group so people are not 'dropped' again at four weeks?
- 🕸 Will it cover finances and benefits?
- 🏷 How will service user's families be involved?

The main two themes to arise from this consultation are that four weeks is not long enough, and that people are reluctant to speak with their GPs regarding mental health.