

The SUN Network Cambridgeshire and Peterborough Community Interest Company







The SUN Network's role is to amplify the voice of people needing mental health and drug and alcohol support within Cambridgeshire and Peterborough.

We support people with lived experience to work alongside commissioners and service providers in co-production, and involvement.

Our Mission and Values

Our vision is that everyone in Cambridgeshire and Peterborough will have equitable access to high quality mental health and drug and alcohol interventions and services at the time when it is needed.

We also believe that all services should be co-produced with service users having a say from strategic level right through to ongoing evaluation, and that this involvement should be purposeful and meaningful.

Our values have been chosen for us by those that access or have accessed mental health services. These are called 'The Five Values' and are embedded in all the work that we do.

They are:

- Empathy
- Inclusion
- Honesty
- Personalisation
- Working Together

"Nothing about me without me" (Equity and Excellence: Liberating the NHS, July 2010). This relates to the concept of shared decision making with service users and carers being experts by their own experience.

We are an independent not for profit organisation that is steered by its members. Our vision is that mental health, drug and alcohol services in Cambridgeshire and Peterborough are the best they can be for the people who need them, when they need them. To achieve our vision, our friendly team work alongside people to get their voice heard and respected, and to maximize the influence of their expertise and experience

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The SUN Network Strategy 2022-2025

Foreword:

It is difficult for people to speak up. Their voices need to be heard to adapt the services they use to their actual needs.



It's been a journey of steady growth for us at The SUN Network since we established our independence in early 2018. Our principles and values haven't changed. We still feel privileged to have the roles that we do – reaching out to people with lived experience, getting to know them and their stories and helping them speak up about their ups and downs in ways that can fully inform service improvements.

Co-production is now one of those words that is everywhere – and rightly so. New investment increasingly is not made available for health and social care unless bids can be shown to be properly co-produced. This is an area which we have really embraced in the past couple of years. We believe our time has come to bring people with lived experience together with professional colleagues from the NHS and the local authorities – working collaboratively to address gaps, solve problems and bring about the changes that can be desperately needed.

A lot of barriers remain. Since early 2020 the pandemic has led to immense pressures on all of health and social care, together with increasing demand for mental health and substance misuse services. Major reorganisations especially in the NHS can distract us from making the improvements that are demanded by those using or seeking these services. Co-production needs a healthy space in which to flourish and this can be hard to find.

We are encouraged by the progress so far, and the determination of service providers and commissioners to work with us as equal partners. We are ambitious for the next three years – both to do more in our traditional areas of mental health and substance misuse and to take our skills into other areas of health and social care

We have been very encouraged by the positive comments from partners during the strategy development stage.

In the next few pages we explain what we aim to do and how we will do it.





Strategy Development:

Once established as a Community Interest Company in January 2018 we created a Business Development Plan for 2018 to 2021 against which we monitored our progress at our quarterly Board meetings. Late last year we took time as a team to reflect on our progress so far.

We set ourselves 8 objectives in 2018:

Objective 1: Create a clear member offer and increase the number of members

Early on we redefined 'member' as people who were 'meaningfully engaged' in our work. e.g. doing more than simply sharing their views on one occasion.

249 people have been working with us in this way for the first three quarters of 2021/22.

Objective 2: Create a system for gathering views about mental health, drug and alcohol services, and share these views routinely and transparently with key strategic partners

At the end of quarter three 2021/22 we had heard from 594 people with lived experience so far in the year and fed back what they had to say to the appropriate services, commissioners and boards.

Objective 3: Form new partnerships, and network with organisations, to enable us to reach people with an interest in mental health, drug or alcohol services. This network will enhance the knowledge of our partners and help us share information about the needs of people



In the early days we used Memoranda of Understanding to formalise our relationships with key partners and to build constructive working relationships with organisations such as Cambridgeshire and Peterborough NHS Foundation Trust (CPFT), CPSL Mind, Healthwatch, and Rethink Carers.

Objective 4: Capture the views of people who are not accessing specialist mental health, drug or alcohol services

We reached out equally to service users and service seekers, recognising that the needs of the second group were just as important as those already getting professional support.



Two heads are often better than

one. Working together is easier

than silo working.



Objective 5: Improve communication with members, targeting communication to what people are interested in, and celebrating and sharing our successes

We take great pride in our ways of communicating confidently and accurately with all who may want to know about our work. Our tone of voice on social media is cheerful and engaging. On review we felt that we could do more to celebrate our successes and publicise them.



Objective 6: Clearly describe and support the involvement opportunities we offer

We believe the clarity of our communications is good. It remains important to us to make sure when people with lived experience are beginning to speak up that they are thoughtfully supported - before, during and after their involvement.

Objective 7: Develop a training offer for service providers, helping them to involve people who use their services better

In the past couple of years we have significantly increased our training activity. This has been, for example, with specialist health care assistants, ambulance staff, police staff, addiction training, and

above all our Co-production Training offer.

Objective 8: Rebrand our services

This was important to us when we were newly independent. We still make sure that we communicate in jargon-free down to earth ways, and that we are warm and welcoming, professional and friendly in all our interactions with the people who we help to speak up.

Once we had checked our progress as a team we considered our Strengths, Weaknesses, Opportunities and Threats. This led on to the drafting of some strategic aims which we turned into a short survey and used to consult with partners. The feedback confirmed that we were on the right lines in our thinking about where to focus our

efforts in the next three years.

Thanks to all of the team for the dedication, passionate and productive work you all do.

The service provided by The SUN Network is nothing short of amazing. I am looking forward to working more closely with SUN in 2022.

I see The SUN Network as integral to the Integrated Care System work moving forwards

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Vision:

We look forward to the day when all health and social care services in our area are the best they can be, through people with lived experience being involved from start to finish in the whole process of service improvement.

Goals:

Goal 1: Enable more people and a more diverse range of people to speak up about their experience

Why?

Diversity is key – there is a need to ensure it isn't just the same voices that are heard.



The pandemic and other factors have led to an increased prevalence of mental health issues in the population as a whole, which means that the number of people who have something important to say about their needs and experiences in Cambridgeshire and Peterborough is vast.

Although we hear from hundreds of people every year, many are not able to make an ongoing commitment to speaking up with our support. The projects we get involved in are in many different services – from community mental health, to eating disorders, to substance misuse drop ins, and peri-natal mental health. So we want to be able to call upon a wider and bigger range of people so that we can contribute meaningfully to every service improvement. The people we hear from also need to be representative of the population as a whole in terms of geography, ethnicity, sexuality and other areas of potential disadvantage.

How?

We will:

- Continue to develop our social media profile in order to reach new seldom heard communities
- Build on our very good reputation to publicise our successes and communicate what we do through word of mouth

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 Work in partnership with other voice organisations to play our part in addressing health inequalities (e.g. Healthwatch and the Gypsy Roma Traveller community)





Goal 2: Promote the principles and practice of co-production in everything we do, including projects and training

Why?

It is now accepted that when services need to be developed, this work will be more successful if people who use or may use the services are equal partners in the work from start to finish. This is what co-production means. It is a way of working that we have always wanted, which is now official policy.



In the past year we have created Co-production

Best Practice Guidance and begun to provide training for professionals and people with lived experience on this subject. This work has been well received and there is increasing demand for it among colleagues in health and social care, and elsewhere. We are now well placed to go to the next level.

We are all in this together, whether this is as someone using the service, a person delivering the service or as a commissioner of that service

How?

We will:

- Advertise and deliver our co-production training on a wider scale, seeking new customers from outside the statutory services and outside Cambridgeshire
- Refine and develop our training offer in response to feedback
- Within the local mental health system, champion best practice in co-production and also encourage honest conversations with colleagues about whether this standard can be met
- When true co-production is not possible, focus on the importance of closing the feedback loop between people with lived experience and professionals



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Goal 3: Improve the impact of our work e.g. better services, through effective joint working with partner agencies

Why?

In our team discussions we have recognised that sometimes it is hard to see the ultimate impact of what we do. We are confident that the people we engage with find this a positive experience which benefits their mental health, but it can sometimes be hard to see the changes that are made to services as a result of our involvement. The health and social care landscape – even more now because of the pandemic – can be complex, rigid and massively pressurized. This can make it hard for us to see the results of what we do, but we owe it to the people we engage with to be able to show them the differences they have made.



Impact is also to do with how effectively we amplify the voices of the people we help speak up. Sometimes this is through our presentational and influencing skills. Sometimes it is through our communication skills such as the addiction recovery stories we have produced on video in the past couple of years.

How?

We will:

- Consolidate our position within the new Mental Health and Learning Disability Business Unit (part of the Cambridgeshire and Peterborough Integrated Care System) so that our voice is heard and acted on
- Develop and maintain our own impact database
- Be able to offer a range of "high impact" ways that we can help people speak up most powerfully, building on our present collection of patient stories

Goal 4: Use our position to enable people with lived experience to make a difference in other areas of work e.g. training, recruitment, communications, and peer support

Why?

Because of all the people with lived experience who we meet, we are well placed to give them opportunities to have influence in many ways that are not directly about service improvement.

Sometimes an organisation may have its own ways of engaging with service users to interview for posts or produce user-friendly leaflets. But in other scenarios we can do more to support people to give presentations at training events, or make up recruitment panels. This activity can have a profound impact on professional colleagues – for example at our training sessions in substance misuse with police cadets. It can also be extremely therapeutic for the people concerned.







How?

We will:

- Create a pool of people with lived experience supported and trained as necessary to take part in recruitment of staff in other agencies
- Share our expertise in using the language that non-professionals can understand to help partner agencies write good publicity material
- Where possible, promote good practice in communications to partner agencies with a view to their becoming less reliant on us over time

Goal 5: Take on new areas of work with new groups of people who need to have a voice when we are best placed to do so

Why:

We believe that locally we have credibility and a good reputation with our partners, evidenced by the new business we have accessed over the past year – for example our work on the County Council's Counting Every Adult programme. We want to make the most of this and bring our knowledge and skills to new areas of health and social care. We think what we do is transferable to many different areas of public life. We are aiming for steady growth, so that more people benefit from our approach.

In business terms we are also keen to generate income from a wider range of sources to ensure that as an organisation we are financially stable and secure. In the past year we have built more of a regional and national profile (e.g. with the East of England Ambulance Service Trust, NHS England and the Cambridgeshire Constabulary). We can use this as a strength in seeking new business on a wider scale.







How?

We will:

- Bring our skills to the newly commissioned engagement facilitator post for older people with mental health conditions, at the same time as establishing new relationships with statutory and voluntary sector colleagues
- Scan the horizon for new business opportunities and make bids as appropriate
- Seek opportunities for development within the Integrated Care System (ICS) structure from July 2022
- Use our links with voice organisation partners in neighbouring counties to identify potential new business opportunities



Goal 6: Ensure we are as effective as possible in developing our areas of expertise and looking after each other

Why?

The pandemic has made the last two years very hard for all of us in different ways. We have learnt the crucial importance of looking after each other as a team, being flexible about our working practices and checking in sensitively with each other on our mental well-being. There are still uncertainties about how we will all do our work in the coming years – operating differently whilst maintaining our effectiveness.

So this goal is about our key resource – our staff and their passion, skills and commitment to their roles. It is about both their ongoing skills development, and their well-being.





How?

We will:

- Nurture a sense of team, with clear standards for staff around the balance between office working and working from home
- Use supervision and appraisal to support the professional development of each member of the team
- Explore the use of volunteers to take on meaningful engagement roles, with the potential to take on paid roles as they may arise



And Finally:

We feel privileged about the roles we have in The SUN Network and in this strategy we have tried to be ambitious but not naïve about what we can achieve in the next three years.

Thanks to everyone who has helped us develop our goals – people with lived experience, team members, commissioners and colleagues in other agencies.

We see this document as a set of promises to the people – past, present and future – who may need the local NHS and social care services. Together we will do all we can to make them better.







(Image from Eating Disorder pathway co-produced work with carers/family of people with lived experience of eating disorders and The SUN Network)

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