

Past, present and future



Editorial

Welcome to our fourth annual magazine which we hope you will find interesting and provide you with a good insight into our organisation.

The NHS is now in its 70th year so the theme of this year's magazine is past, present and future. This magazine features articles submitted by our staff where they reflect on how services have changed over the years, acknowledging challenges, reflecting on the progress made as well as plans for the future.

As an organisation we are one of the largest mental health and disability care providers in England, employing more than 6,000 staff, serving a population of approximately 1.4 million and providing services across an area totalling 2,200 square miles.

We work from over 60 sites across Northumberland, Newcastle, North Tyneside, Gateshead, South Tyneside and Sunderland as well as providing a number of regional and national specialist services.

If you would like to find out more about us you can visit our website at www.ntw.nhs.uk or find us on Twitter and Facebook by searching for @NTWNHS.

If you have any feedback about our magazine or any suggestions for future editions we'd be delighted to hear from you. You can reach us at communications@ntw.nhs.uk.

Adele Joicey
Communications Lead

Contents

Introduction	4
Peer support	6
Sowing the seeds of engagement and inclusion	8
Research and development	10
Learning together	12
A website fit for the future	14
Thanks Amanda!	16
Learning disability and autism	18
Positive and safe care	22
Charitable funds	24
The future of LGBT	26
30 years of volunteers	28
Innovation in autism	30
Our history, our achievements and our future	32
From child of the NHS to governor: my journey	34
A message from our Chair	36

Introduction

The theme for this year's magazine and Annual Members' Meeting, is "past, present and future." I have decided this year to focus my piece on mental health, but that is not to underplay the great work our staff do in our learning disabilities, autism and neuro-disability services.

Since the creation of the NHS in 1948, mental health care has made huge strides in the way people are cared for by the State, with more effective diagnosis and a wider range of treatments to support people towards their recovery.

Where progress has been slower has been around the stigma associated with mental ill health; though there have been some real changes in attitudes over the past decade.

The old asylums where people were hidden from our society are now, and rightly so, a part of history. In 2018 mental health is starting to be recognised as being just as important as our physical health.

Throughout the last 70 years there have been some notable changes which has led us to where we are today. In 1959 the Mental Health Act was implemented which was designed to make, in the most part, treatment voluntary and informal; to ensure that for those who did need care there was a clear legal framework; and in particular to move treatment, where possible, away from institutional care into the community.

As well as the laws changing so have our services. Our community services are easier to access than ever before. Our initial response services are open for anyone to call, 24 hours a day, making it easier to access therapy without a referral as well as, where needed, to our crisis and liaison services or our Street Triage services which are delivered jointly with Northumbria Police. But there is still more we can and will do as accessing some of our community services takes too long, particularly for young people. This will be a key priority for the Trust and our staff this year and into the future.

We have also seen very positive changes in the quality of our buildings. We have invested in purpose built state of the art inpatient facilities. In the 12 years our Trust has existed we have invested in significant estates projects which include St George's Park in Morpeth, Walkergate Park in Newcastle, Bamburgh Clinic also in Newcastle, Hopewood Park in Sunderland and Ferndene in Prudhoe as well as many smaller scale projects which have made a significant impact by providing therapeutic environments for those we serve. This is particularly important as the range and breadth of our community mental health services means that only 3% of people whom we provide services for spend time in our inpatient facilities.

Thanks to the rise of social media and the willingness of celebrities, including our Royal family, to talk about their own

experiences, mental health has never had a higher profile and the stigma of mental health is now being challenged throughout society.

Our future aspirations are to move forward collaboratively with our service users and carers. Sharing lived experience can help us to shape, improve and deliver our services in the way that people want and need. By combining both professional and lived experiences we can make a real difference to those we serve. This is because we know that where services are developed with service users and carers as equal partners with our professionals, they support recovery and provide a better experience.

It is hard to imagine what the mental health and physical health needs will be in 2088, never mind the services available to meet those needs and aspirations. But I would like to hope we stop talking about them as if they are different things. I also would like to believe that everyone will feel more comfortable talking about their mental and physical health with equal, increased confidence.

As the NHS enters its eighth decade, we must learn from the past, work tirelessly to improve things in the present, while ensuring the future is one where people live longer, healthier lives and the inequalities in life expectancy have been all but eliminated.

John Lawlor
Chief Executive

“ We know that where services are developed with service users and carers as equal partners with our professionals, they support recovery and provide a better experience. ”



Peer support

There is a lot to be said about peer support and where we have all come from. As a group of people we are strong, stronger than any group of people I have met before.

We work hard at what we do and we are all proud of who we are as people as well as how far we have come. The past for some of us has been a rocky road, but we have come through it and developed a number of coping skills to help us move forward. Coping skills that we can then pass on to others to allow them to grow and develop for the future.

Our past does not define who we are but has shaped us. We are all individuals with a different set of skills that we use in different ways. We are a hard working group of people who have a past but live for the present and believe in the future, a future filled with hope and light.

At present there are a number of us within the Trust working across a number of different places, some of us in the community, others within specialist services and some within inpatient settings.

We are a resource that is used within NTW to help people to find hope and belief for the future. To show that recovery is possible, even in the darkest of times we shine a light.

We are here for both the service users that we support and the staff that we work with, our teams find us a valued asset. We bring a different point of view to help those around us.

Who knows what the future holds for us. It looks bright in so many ways, we are a resilient group of people that I am proud to be part of.

Laura Ions-Chell
Peer Support Worker

Sowing the seeds of engagement and inclusion, tales from the potting shed

Our lives are defined by turning points, you know those watershed moments? First day at school, leaving school, first job, first love, and the list goes on. If we look to the history of the Trust in the years to come I vouch that the decision to set up staff networks in 2016 will be seen as a watershed moment for our approach to equality, diversity, inclusion and staff engagement.

Staff Networks, in the context of their past, present and future are a bit of a poser; there's a little past – some great work at the 2017 Pride and Mela events, but it's mostly about the future. To use a gardening analogy, in 2016 we planted some seeds on some barren land, with the care and nurture from a small dedicated group of gardeners. In 2018 we have some green shoots, saplings that still need support but show promise of being verdant forests of the future that are vital to the eco system of the Trust.



So far we have four networks:

- Black Asian Minority Ethnic (BAME) Staff Network which launched in March 2016
- Disabled Staff Network which launched in November 2016
- Lesbian Gay Bisexual Transgender (LGBT) Staff Network which launched in May 2017
- Mental Health Forum which launched September 2017

The seed packet for each of our networks advises that we can expect four growth periods in the life of staff networks, four watershed moments.

- Foundation – the earliest stage of network development, the foundation stage is all about getting your network up and running and familiarising yourself with the basics.
- Growth – where things start to pick up, and regular events and committee meetings start to take shape.
- Consolidation – a network at consolidation stage is mature enough to confidently work with other groups and committees, share advice across the Trust, and put together a business plan.
- Leadership – a network at this stage uses its wide range of knowledge to consistently host intersectional

events that go beyond the Trust, as well as being able to clearly articulate its aims (through a manifesto or vision) and resource requirements.

A survey of the landscape suggests that our networks are in the growth stage but are showing real signs of consolidation as they head into their third year of growth, developing social media networks which help to expand their membership. Their branches have more leaves.

We understand that the process of network development is not linear, people move on, priorities change, and what seems certain one day may not hold true the next. We certainly don't expect networks to hit all of the stages one after the other in quick succession and then remain at the consolidation or leadership stages forever.

Networks will not only pass through the stages at their own pace, but may even drop back a stage or two depending on changes to the committee or business area. But we hope that with the care and passion from all those who are nurturing their growth, all will eventually grow and settle at the consolidation stage, with some maintaining ongoing leadership.

We're excited to work with our staff networks and help them develop, grow and lead the way for inclusion in our Trust.

Christopher Rowlands
Equality and Diversity Lead



Research and development: Our past, present and future

Our Trust has a long history of involvement in research, as we would expect from an innovative and forward-thinking organisation. Research has historically been linked with Newcastle University and its medical school, with our staff and patients being involved in much of the early research around Alzheimer's and Lewy-Body dementia.

This has ensured that we have been involved in a range of collaborative research partnerships across the UK and beyond, which have provided the basis for our current and future research strength and involvement.

Whilst we are rightly proud of this history, we have continued to innovate and develop new research in new areas, in particular in mood disorders and autism.

NTW has a research strategy which has seen the Trust develop from 13th most research active mental health trust in 2012 to third most active in 2017 (figures from the National Institute for Health Research, NIHR). This is testament to the wide involvement and interest of our staff in research and how being involved can produce better services and outcomes for those who use our services.

We have also broadened the range of our research from being focused on medically orientated trials and treatments to psychological and social models, which in turn engage a greater range of our clinical staff, and developing a significant experience and reputation in co-produced research which is

jointly designed and led by service user and carer researchers. In addition, research now covers specialities such as addictions, learning disabilities and psychosis and a range of therapeutic approaches such as art, dance and signing.

We must still ensure that research does not happen in a vacuum, its real benefit lies in its being used to improve and develop practice, and we are increasingly working to improve dissemination of research results and outcomes, for example through our excellent annual research conference. NTW's Library and Knowledge Services also regularly disseminate current awareness bulletins on a range of subjects and a recently developed partnership with Tees, Esk and Wear Valleys NHS Foundation Trust and York University aims to provide an even better range of knowledge exchange and dissemination activities.

New research grants totalling £3m have been awarded to NTW for the next three years and we hope to continue to improve the quality and standards of care and treatment through positively influencing practice and providing new and better evidence for the best available treatments for those we serve.

Simon Douglas
Joint Director of Research, Innovation and Clinical Effectiveness

Learning together



In October last year the Safer Care directorate was established to bring together a number of clinical support functions, all of which underpin the delivery of good clinical governance. It brings together a number of previously separate corporate services under one umbrella which has the overall aim of ensuring that the care we offer is, and continues to be, as safe as possible. It includes the following, formerly separate functions:

- Patient safety (including health and safety, security, incident, complaints and claims management)
- Public health

- Safeguarding and public protection
- Corporate nursing development
- Emergency preparedness, resilience and response

It is a principle of delivering high quality safe services that we learn and improve when things go wrong. We must be able to provide assurance, not only to ourselves but also to those who rely on our services and the wider public, that we have done so.

Improving our understanding of service quality as experienced by those who use our services is very important and underpins clinical governance within our organisation.

The Safer Care directorate have played an integral part, together with the Locality Care groups, in the development of the Trust Learning and Improvement Group.

The group have a specific role of ensuring that we are committed to improving the care offered to service users by ensuring that whenever things go wrong, learning is identified, spread and embedded in everyday clinical practice to reduce the likelihood of the same thing happening again.

It is also important that this sharing and embedding takes place when things go

well. The group draws together learning from a wide range of sources, both from within our organisation, but also learning from elsewhere. Together with Locality Care Groups, a Safer Care information hub has been developed, and is available for all staff on our intranet. This also includes a monthly Safer Care newsletter to ensure learning and good practice is shared.

Jan Grey
Head of Safeguarding and Public Protection



A website fit for the future

Last July we launched our new website and over the course of the last 12 months we have been reflecting on how we can improve and build on, what is already, a solid foundation.

A good website should evolve so we have been using feedback and analytics to look at how we can best provide the information that the users of our website want, whether that be to find help or support, information about our services or employment with us.

This has led us to thinking about how we can move our website forwards in a collaborative way and we are embarking on an exciting piece of work which we hope will dramatically change the experience of visitors to our website who want to know more about our services. In the past our website has had a very structured build with a one size fits all approach, but one size never does fit all, so it was time to look to do something different.

Our website now has the capability to individualise services, so we can display the information that not only our services wish to provide, but what users of the site wish to see. This will give us tremendous freedom to develop the information we can provide in our digital world.

Our plans are to work with individual services so we can gather both a clinical and operational perspective on what information they want to provide, but to do so collaboratively with our patient and carer engagement team so we can also understand the views of those using our website.

By working together we can ensure that we provide the users of our website with the information they want, from all perspectives whether that be a service user, member of staff, another organisation, or a commissioner.

By learning the lessons from the past, and by moving forwards in this collaborative way, we can ensure that our website is fit for the future.

Adele Joicey
Communications Lead

Thanks Amanda!

I've been asked to write about collective leadership, but I'm struggling to see beyond the theme for this year's magazine, 'past, present and future.'

So I could write about the work we've all been doing over the past year and it might read something like this. More collective leadership development programmes for approximately 120 senior leaders, masterclasses, workshops, team development sessions and group and individual coaching.

Pause for breath.

The NHS was celebrating its 35th birthday when I started my first job at Darlington Memorial Hospital and now we're celebrating our 70th. In 1987 I moved on to be Head Occupational Therapist at Cherry Knowle Hospital. Amanda was my manager. She was different, apart from the fact she had bright pink hair, was into creative therapy and drove a Citroen 2CV, what really made Amanda different was the way she managed and impacted on me. Amanda showed real interest in my development.

Amanda allowed me to lead. She would allow me to make some mistakes and would help me to dust myself down and to learn by developing better ways of solving problems and in making the most of opportunities. She rarely told me

what to do. She encouraged me to build a team that developed ideas collectively and that solved problems collectively.

We supported each other. We were there for each other but most of all, we were there for our service users and I think we did some good work. Hand on heart I didn't feel that it was 'my team.' It felt like it was 'our team,' and that I was there to serve the interests of others.

Times are changing but I wonder if the dilemma remains the same? What might we do to ensure that we are able to do what we need to do, to the very best of our ability? Well, I think I learnt a great deal from Amanda, but let me try to summarise. It seems important that we make the most of our collective abilities. Acknowledge that it can help if leaders allow others to take the lead. Try to experience the world through the shoes of other people. Ask difficult questions of ourselves and not just of others. Create the time and space to solve problems collectively, to develop ideas collectively and to hold each other to account. Be there for others when they need some TLC and help and to try to overcome the obstacles that come our way with a smile and with a resolve to make a difference.

Collective leadership isn't a new idea, very few ideas are! I am sure that many of you will know and will have had the

pleasure to have worked with someone like Amanda. Our challenge is to have one eye on the future and to think about what we might need to do differently in order to thrive. It's everyone's challenge. So you might want to talk about this in your teams. What's working well? What

isn't working as well and what might you do to fix the things that need fixing and to develop the things that need to be developed?

Thank you Amanda.

Mark Spybey
Head of Team and People Development

“ She was a mentor because I needed mentoring.
She nurtured me because I needed nurturing.
She supported me because I needed support.
She challenged me because I needed to be challenged.
She believed in me. ”



Learning disability and autism

Learning disability and autism services are constantly changing but there are three key projects which, although they have been around for a while, seem to have really started to flourish over the last 12 months. These are the GreenLight Toolkit, Project Choice and STOMP.



The Department of Health originally published the GreenLight Toolkit which is a way of checking how well mental health services meet the needs of people who have a learning disability and/or autism. It then informs the development of plans to improve services. The toolkit has 27 standards to make sure that reasonable adjustments are in place to provide fair and equitable services that meet peoples' needs. These include assessments, accessible information, personal care, physical health and equalities.

The GreenLight Toolkit was relaunched in NTW at the Nursing Conference in April 2018 where we are taking a much broader approach and using the toolkit to look to improve access to all of our services, both adult and child, and not just mental health services.

To do this we have established a Trust wide group and have a dedicated section on the intranet, as well as hosting a series of events and workshops. This will help services understand the toolkit and to look at the improvements they can make to ensure all of our services meet the needs of people with a learning disability and/or autism. Although this work is in the early stages, keep an eye out for the GreenLight logo appearing more and more.

STOMP

Our staff have been working in this way and leading the way for some years now but the Trust recently publically showed their commitment to an initiative to stop the over medication of people with learning disabilities, autism, or both (STOMP).

On Wednesday 25 April at Gosforth Civic Theatre, Professor Eilish Gilvarry, Deputy Medical Director at NTW signed the 'Health Care Provider' pledge on behalf of the Trust.

Figures show that over 30,000 adults with a learning disability, autism or both are estimated to be receiving an antipsychotic, an antidepressant or both without an appropriate clinical reason. We have an action plan and are actively working within services to raise awareness and work with individuals and their families and carers to identify alternatives to medication. Clinicians have also been sharing their good practice nationally sharing the initiatives from both community team settings and autism inpatient services.

The autism and learning disability strategic clinical network has also been launched this year, and whilst in its infancy, it will continue to nurture and build on this good practice and enthusiasm as it grows and develops.



Project Choice

This year has seen the Trust support a fantastic initiative called Project Choice.

This is a Health Education England (HEE) programme which supports young people with learning difficulties and or autism to get into training or employment. Project Choice is hosted within the NTW Training Academy and we have supported a number of staff to take up secondments to help deliver the project and support the interns. We have also been overwhelmed by the enthusiasm shown by Trust staff to act as mentors across a variety of areas taking placements.

Project Choice offers young people the opportunity to learn new skills in a real work environment. As part of its support the Trust has supported fifteen placements. The project runs throughout the academic year from September until

July and involves interns working at their placements for four days a week plus a day at college.

It gives young people the chance to gain experience of being an employee, and develop appropriate attitudes and behaviours for the working environment. Importantly it offers an understanding of their skills and strengths and how to do a job properly.

We have been working in partnership with City Hospitals Sunderland NHS Foundation Trust, The Newcastle upon Tyne Hospitals NHS Foundation Trust, Tees, Esk and Wear Valleys NHS Foundation Trust, Newcastle City Council and Sunderland City Council.

Caroline Wills
Learning Disability Clinical
Development Lead

Quotes from interns

‘The Project has built my confidence up, helped me achieve an interview and get a part time job.’

‘Project Choice provides excellent support and guidance to help interns choose the field of work that is best for them, by receiving placements within different timescales. As well as this, you receive support with Maths and English and are able to hone those skills while learning new ones. Overall, I believe it is a worthy experience worth taking on.’

Quotes from mentors

‘My intern has said on more than one occasion how much they’re enjoying working in the team.’

‘My intern always works hard in whatever task he is doing and is polite and courteous to both staff and patients alike.’

‘During my time as a mentor, I have learned a lot about myself – for the better!’



Project Choice
Making a Difference

Positive and safe care

Positive and Safe Care and Talk 1st are now well established and have been going from strength to strength since September 2016 across all 55 inpatient wards, as well as two community teams.

Some of our cohorts are into their sixth cycle. At each cohort review it is refreshing to see the continued enthusiasm being demonstrated by teams, developing and implementing new and positive ideas that support service user and carer centred care.

Teams continue to work through the ten Safewards interventions. Safewards is a model which explains variation in conflict and containment and suggests ten interventions which are:

- clear and mutual expectations
- soft words
- reassurance
- mutual help meetings
- bad news mitigation
- positive words
- calm down methods
- discharge messages
- talk down
- know each other

Our teams are also working on the 75 Star Wards ideas, an initiative which enables patients to make the best use of their time in hospital and allow staff to use all their skills and personal qualities. Well over half of our wards have attained the prestigious Full Monty award, with the other wards working towards attainment.

Another piece of exciting news is the arrival of our Service User Project Coordinator. Paul Sams has joined the team on secondment for a year, he has settled into the team and been out visiting our wards. Paul brings a new dimension to our team through his lived experience of being a service user. This experience has been well received and utilised across the Trust as we develop our Talk 1st strategies.

Paul has supported us with the development and roll out of our new social media presence across Twitter, Facebook and Instagram. We are positive

about the great Talk 1st work happening in the Trust and we now have a platform to share this and would like you to join the conversation.

The five inpatient wards at Ferndene Hospital have started working towards their Full Monty award. Ferndene in collaboration with Star Wards decided to develop something more focused on children and young peoples (CYPS) wards and their service users. We are delighted to say that all wards achieved the new CAMHelion award. This is a great achievement as these are the first awards to be made in the country.

On Wednesday 7 November 2018, we are delighted to announce that we will be holding a joint conference with our colleagues from Tees, Esk and Wear Valleys NHS Foundation Trust. Our conference, Putting People First: Positive and Safe Care, will bring together nationally recognised keynote speakers, 20 workshops and a poster market place. For more information contact Talk1stteam@ntw.nhs.uk. The conference will mark the launch of the North East and North Yorkshire Restraint Reduction Network.

Currently one of the main focuses of the team is promoting the reduction of restrictive interventions and this has been supported through the roll out of the positive practice process boards on all of our wards. This is a tool that allows teams to work using best practice evidence, Trust policies and NICE guidance. Each team has received training and has been supported to develop using the board in a way that promotes co-production.

Looking to the future The Positive and Safe Care team will be involved in the implementation of the Sleep Well project. This will look at a range of interventions that will promote good sleep hygiene for our service users.

Prior to wards commencing their Talk 1st journey, ward teams were asked to complete a baseline survey. This process is about to be repeated so in the coming months we will be able to chart our progress.

Ron Weddle
Deputy Director, Positive and Safe Care



Charitable funds

Over the past year our charity, Shine, has received a staggering £38,000 in donations from kind donors and organised events.

Some of the donations came from Walkergate Park Starr Team who raised over £1,300 from their annual summer fayre. Our Commissioning and Quality assurance team raised over £800 by organising various fundraising events. Neil Cockling, Hospital Chaplain and Freedom to Speak Up Guardian raised over £350 by holding a “penny sale” and the Patients Finance Team at Northgate Hospital raised over £140 by selling

second hand books. A blind raffle was held at our annual staff awards which raised over £1,500. A big thank you must go to everyone who has so generously donated to our charity.

Last year we had five places in the Great North Run and our runners raised over £2,000 between them. This year we have managed to secure ten places with staff from various departments and locations who will run for Shine. Hopefully friends and colleagues will be supporting them with kind donations and providing moral support along the route.

The money has been put to great use and this year our charity has provided a lot of activity equipment and supported various activities across our organisation.

There was an extensive summer programme of activities for the young people at Ferndene which included a sports day every week, environmental awareness days, nature challenges, building tepees, pet therapy, and creative music workshops. They also had various zones for activities which included a wet zone with sand and water play.

We have also purchased a two seater quadricycle for patients at Northgate Hospital which looks like great fun to ride on!

Marsden ward at Monkwearmouth Hospital purchased nearly £1,000 worth of sensory equipment and Woodhorn ward at St George’s Park bought planters and gardening equipment.

Our charity has also provided funding to support an interview training course for the Patient and Carer Engagement team which equips service users and carers with the skills and confidence to take part in staff interviews as part of recruitment at the Trust.

Plummer Court were able to purchase children’s seating and a bookcase for families to use when coming to the unit.

Several wards have benefitted from the purchase of activity equipment such as televisions, kettlebells, sewing machines, iPods and music systems.

Our future plans for the coming year include securing funding for the Recovery Colleges which will provide them with equitable financial support. The Recovery Colleges deliver innovative, free courses which give people a safe place to learn, connect with other people and develop skills.

Our charity appreciates any donation or fundraising activity, no matter how large or small. You can donate in the following ways:

By cheque made payable to “NTW FT Charity” or you can donate cash by handing it into any Trust Cashiers Office. We also have collection tubs in all of our Trust cafés and shops.

You can also give by bank transfer or by using our Justgiving page: <https://www.justgiving.com/northumberlandtyneandwearnhs>

If you would like to find out more about our charitable funds work you can contact charitablefunds@ntw.nhs.uk or telephone 0191 246 7215.

Ailsa Miller
Patients Finance and Cashiers Manager





The future of LGBT

In 2017, the Trust (in collaboration with UNISON) made the welcomed decision to form an LGBT forum, and in May 2017 we held our inaugural LGBT+ meeting.

By the end of the year, it was decided that the group would be more effective if the UNISON aspect became its own self organised group so it could concentrate on being able to negotiate better working conditions and other favourable benefits for the Trusts LGBT+ employees.

This then led to the birth of the LGBT+ network which was rebranded with a similar but updated agenda. The aim of the network is two-fold:

Primarily, it is there to provide an environment where LGBT+ staff can feel safe to be heard, to share and to speak openly without being judged. We have also set up an online network where staff can participate and also access support and resources.

Secondly, the Trust wish to work towards being part of the Stonewall equality and diversity index, recognising that it is in everyone's interest. The workplace equality index is a benchmarking tool for employers to measure their progress on LGBT+ inclusion in the workplace. Organisations taking part recognise that people perform better when they can be themselves.

In order to achieve this a lot of work needs to be completed to ensure we meet the Stonewall requirements and the LGBT+ network can be instrumental in being able to achieve many of those objectives, with the support of the Equality and Diversity Lead.

As Chair of the LGBT+ network I will be undertaking a large proportion of the work in conjunction with the corporate leads and overseeing work from within the LGBT+ network.

LGBT+ awareness training has begun which has so far been received really well. We plan to continue to roll out this training across the Trust, as well as going out to areas that find it difficult to attend central locations.

We are currently looking at how to incorporate sessions to medical students, psychiatrists of all grades and non-clinical staff. In conjunction with our awareness programme, we will set up an allies programme so we can reach all corners of the Trust.

We also have plans to create relationships with the LGBT+ networks

in neighbouring organisations and health trusts which could also prove beneficial for us.

The NTW LGBT+ network will also eventually be able to provide support and consultation to the various departments within the Trust on LGBT+ issues, not only for staff but also for service users. We want to ensure that LGBT+ service users' needs are addressed and not overlooked, and within that remit, we will need to address bi and trans specific topics.

The LGBT+ network also wants to create positive, active relationships with the other Equality and Diversity Networks within the Trust and we aspire to be highly visible role models.

By having a diverse workforce, this means that our organisation can offer a wider range of ideas, skills, resources and energies to give it a competitive edge. We would also have a much wider pool of talent.

The LGBT+ network want to work in partnership so that NTW can be a diverse and totally all-inclusive environment and a "great place to work".

Simon Pearson
LGBT+ Network Chair

30 years of volunteers

2018 is a special year for many of us as we proudly celebrate 70 years of our NHS.

The Voluntary Services Department is now entering its 30th year having been through mergers with former Trusts, and now remains proudly part of NTW.

We have a strategic responsibility for the promotion of excellence in volunteering, which embraces and demonstrates the values of the Trust.

We believe working in collaboration with others achieves maximum impact for the benefit of our service users and carers. By working in this way we can meet our organisational objectives through creative and appropriate involvement of our volunteers.

At present volunteer involvement is spread across all our Trust sites where there is an identified need for involving volunteers in a broad range of projects and agreed roles. It is heart-warming to hear and see first hand how volunteers, through donating their spare time freely for the benefit of our services users, carers and staff, enjoy engaging and feel they are gaining valuable insight, whilst at the same time strengthening their own skills.

Our staff who currently support volunteers within their area are incredibly supportive, always valuing their presence and involvement. They are able to witness first hand the diverse range of

skills, talents, creativity, ingenuity and experience they bring to their role, as well as providing support and offering hope for the future.

It is always very encouraging to receive positive feedback from services users and carers who engage with our volunteers.

Volunteers engage in a wide range of roles, both old and new. Roles include social activities within our inpatient services throughout each of our locality care groups, vocational rehabilitation garden project, Tea@2 welcome volunteers, psychology research roles, chaplaincy, hospital shop, library and knowledge services, co-facilitating roles, CQC feedback, Walkergate Park Points of You feedback volunteering roles and STARR volunteers.

We also value working collaboratively and in partnership with NTW Solutions (catering department) and Sunderland Care and Support (Sunderland Recovery College).

We are always pleased to welcome volunteers from all walks of life and we are very grateful to them for choosing NTW as a place to volunteer. Their commitment helps our services in many ways.

At the present time, 51% of our current volunteers have 'lived' experience and volunteer to 'give something back'. They spend their free time purposefully,

whilst some openly share their experiences through identified roles where this is seen as a mutual benefit. We are delighted to maintain our contacts with local universities, recruiting many students into various roles, as well as continuing to welcome our local community into volunteering projects too.

As we look to the future, with its many challenges ahead, I know each and every one of us, including our volunteers, will continue to play a part in shaping our services, embracing difference and continue our efforts to break down stigma even further.

We anticipate that future volunteer involvement will no doubt see the strengthening of our social activities roles across our Trust. The Trust's Talk 1st initiative has, and will, continue to introduce many inroads across our services by advocating and promoting the inclusion of volunteer involvement.

Staff, services users and carers play a crucial role in supporting our volunteers. On behalf of the team in voluntary services, I would like to pass on our gratitude to them, for their support and for embracing volunteer involvement.

I would also like to thank my line manager David Muir (Group Nurse Director) for his unwavering support and guidance and also my loyal and amazing colleagues Sarah and Joanne, for their continued hard work, dedication and support, working together to ensure volunteering remains safe and effective for all.

Wendy M Spratt
Voluntary Services Manager



Innovation in autism



Anxiety disorders affect around half of children and adults on the autism spectrum, with specific fears and phobias being one of the most common anxiety subtypes.

We know that gradual exposure to the object of a phobia can help, but sometimes the way we do this has to be adapted for people with autism. One possible solution is the use of immersive virtual reality environments (VREs) that allow participants to experience those things or situations which they find difficult, but in a controlled and safe environment.

By using the Newcastle Blue Room Treatment, for children with autism spectrum disorder (ASD) aged between 7-17 years, participants can navigate through the situation they find anxiety provoking (e.g. a street or school) and, with therapist support at all times, they can learn new skills to manage their anxiety. Clinical researchers from the Trust and Newcastle University have worked with a local company, Third Eye to develop new ways of delivering treatment for phobia to people on the autism spectrum.

In an initial study the team showed that using a cognitive behaviour therapy (CBT) approach, combined with an 'immersive VRE' reduced specific phobias or fears in young people with ASD, and led to functional improvements in managing real life anxiety provoking situations. The study saw nine children taking part each receiving four 20-30 minute sessions with the results showing eight out of nine children were able to tackle their phobia, with four of the participants completely overcoming their phobia.

These results provided good evidence that CBT with VRE can be a highly effective treatment for a specific phobia for some young people with ASD.

Following a successful application to the National Institute for Health Research (NIHR), the team went on to undertake a trial of the treatment through our Trust and Tees, Esk and Wear Valleys NHS Foundation Trust. 32 children received the treatment which was acceptable to clinicians, families, and young people, and around half of the young people who received the treatment showed change in their anxiety about real life situations.

Following these results, the Newcastle Blue Room treatment became available to families throughout the UK via the NHS.

The team have now completed a small study of adults on the autism spectrum - and the results show some adults make the same improvements as children. However, more research is needed to show the acceptability and effectiveness

for adults before NHS treatment could be started.

For more information about the Blue Room treatment please contact us at NTAWNT.cnds@nhs.net

Jeremy Parr, Victoria Grahame, Morag Maskey
Complex Neurodevelopmental Disorders Service





Our history, our achievements and our future

We have a long history of providing specialist mental health care for women in pregnancy and postpartum, beginning with the opening of a specialist Mother and Baby Unit at St George's Hospital in 1986. There were also Mother and Baby admissions elsewhere in the Trust, such as at St Nicholas Hospital, but over time the provision at St George's became standalone and was relocated to the new build St George's Park in 2006.

Around the same time in 1989, two Community Psychiatric Nurses (CPNs) were recruited in North Tyneside to form a small perinatal mental health service in North Tyneside, expanding with two more CPNs into Newcastle upon Tyne in 2003. Dr Angela Walsh, a specialist Consultant Psychiatrist who had run the Mother and Baby Unit since 1986 joined the team in 2009 enabling it to support women with more severe mental illnesses. The Mother and Baby Unit was accredited with excellence in 2011 by the Royal College of Psychiatrists. Dr Walsh retired in December 2011.

Dr Andrew Cairns, Consultant Psychiatrist, joined the service in 2012. With reorganisation of the NHS, commissioning of the Mother and Baby Unit was transferred to NHS England Specialist Commissioning the following year. Dr Cairns and Mrs Anne Oxley, then team manager, were closely involved during this transition as part of the national Clinical Reference Group.

The Perinatal Community Mental Health Team continued to evolve during this period, collaborating with talking therapies, health psychology and

maternity services to provide more timely access for women to the right care.

In 2014 the London School of Economics published a report estimating the annual cost of perinatal mental disorder as £8.1 billion. This led the Government to announce additional funding for perinatal mental health and NTW successfully bid to expand the specialist community team into Northumberland, Gateshead, South Tyneside and Sunderland. We were also able to recruit psychologists and an occupational therapist.

We were delighted to welcome Claire Murdoch, National Director for Mental Health, to open our new community base at St Nicholas Hospital in April this year. She and Emily Slater (who has lived experience of perinatal mental illness) made moving speeches about the importance of providing specialist care for women at this critical time in life.

Going forward we anticipate doubling our referral rate to 1,400 women per year, contributing to the national target of 30,000 more women getting access to specialist care annually by 2021.

We will also continue to work closely with colleagues on Teesside to provide training to a range of other professionals including GPs, midwives, obstetricians, health visitors and talking therapists.

Andrew Cairns
Consultant Psychiatrist

From child of the NHS to governor: my journey

My name is Denise Porter and I was appointed a voluntary and community governor of NTW NHS Foundation Trust last year and I am also a carer of a son with schizophrenia.

I am proud to be a child of the NHS and a past worker within the NHS too. Born in the first five years of the NHS, I grew up hearing tales of how healthcare was before the NHS was formed. The family needed the sixpence for the doctor before anything else was bought from Grandad's wages. I am justly proud to have begun my working life as a Medical Scientific Officer at the National Blood Transfusion Service Regional Centre at Newcastle General Hospital. I was a worker but I foolishly thought all healthcare was equal and funded accordingly.

It took our son becoming ill and understanding what it meant to have severe mental illness within our family to open my eyes to what was available. The hospital I passed on the bus as a child, with the beautiful buildings and garden that no-one really talked about, was brought sharply into focus as we tried to

understand what was happening to our son and how we could get the help and support he needed. We had a very rude awakening and the despair we felt galvanised me to find out what I could do to make a difference, if at all possible.

So began my education in mental healthcare provision and I started campaigning to help develop an understanding of recovery focused mental health care, with the person at the heart of what good care should and must be.

I learned to push back, to challenge the status quo and never just accept because that's how things were always done.

The journey has been from a family in despair to being appointed vice chair of Trustees at Rethink Mental Illness and last year a voluntary and community governor at NTW. It has been a roller coaster. It's made us resilient and kept us close.

It's a 20 year journey so far and it's still not over. Mental health is my passion, to achieve the very best care possible for those within it. That's staff, carers and most importantly those who use the care. The voices of those who use our care need to be at the heart of all that is done so that the care truly represents and addresses their needs.

Co-production is the key.

Denise Porter
Voluntary and community governor



A message from our Chair

Being appointed by the Council of Governors as the Chair of the Council and of the Board of Directors is a great privilege.

I am getting to know the Trust and its people and to understand what makes the Trust special. I will go on listening and learning. However it is already clear to me that NTW is a very special place.

Despite ten years of austerity, and the many challenges experienced by the communities we serve, there is a strong desire to go on delivering the best services we can to service users and to supporting carers and staff.

The Trust has received a great deal of excellent feedback including the rating of Outstanding from the CQC. However I have not encountered any complacency. Instead, there is a strong commitment to improvement, to innovation and to research and development.

Above all there is curiosity about how to do better and what can be learned from good practice and feedback.

We are facing a tough year with a very challenging financial situation and many fundamental changes as we seek to integrate physical health, mental health and care services to establish an Integrated Care System. As we face these challenges together we will strive to be true to our values - to be caring and compassionate, respectful, honest and transparent.

Ken Jarrold
Chair



Support your NHS - Join our NHS Foundation Trust



Get involved - sign up to become a Northumberland, Tyne and Wear NHS Foundation Trust member

Membership is completely free and as a member you can:

- give your views on the Trust's plans and any issues that interest you;
- vote in the Governor Elections or stand as a Governor yourself;
- receive important information about the Trust.



🌐 ntw.nhs.uk/membership

☎ 0191 245 6827

✉ FREEPOST NTW MEMBERSHIP

See overleaf for membership form

Please complete the following:

Type of member Public *Service User **Carer **(please ✓ only one)**

*Service User - I have used the following NTW service in the last four years: (please ✓ service used below)

**Carer - I have cared for someone who has used the following NTW service in the last six years: (please ✓ service used below)

Adult Neuro Disability Older People

Children and Young People Learning Disability

Mr Mrs Miss Ms Mx Unspecified

First name:

Surname:

Date of birth:

Gender: Male Female Transgender Prefer not to say

Home address:

.....Postcode:

**How would you like us to contact you?
(please ✓/complete)**

Post Tel Email.....

Ethnicity:

White British White other Mixed Black Caribbean
 Black African Black other Asian Indian Asian Pakistani
 Asian Bangladeshi Asian other Chinese Other
 Prefer not to say

How would you like to be involved?

Consider standing for election as a governor Invite me to membership events
 Ask me what I think about services Send information about NTW Trust, including newsletters

Signed: Date:

We will only contact members by their preferred method. The Trust may need to share your information with third party organisations for governor elections, printing and maintaining a membership database.

Cancellation of membership can be made at any time online or by contacting the Corporate Affairs/Membership office on 0191 245 6827 or emailing members@ntw.nhs.uk

Please return to FREEPOST NTW MEMBERSHIP



**Northumberland,
Tyne and Wear**
NHS Foundation Trust

NHS mental health self help guides

Award winning guides written by NHS clinical psychologists with contributions from service users and healthcare staff.

A range of self help guides which cover topics such as Depression and Low Mood, Controlling Anger, Stress and Anxiety offer users the opportunity to find out more about the causes of mental health issues and provide tools to work through feelings and emotions.

The guides are free to access and are available in a range of formats, including audio, easy read and BSL.



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view or download at www.ntw.nhs.uk/selfhelp

Copies of the annual magazine can be downloaded from our website www.ntw.nhs.uk

Please contact us to request a version in an alternative format.

Copies can also be obtained by contacting
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