

Continual collaboration fostering empowerment, recovery and hope

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*Representing the Expanded Post Discharge Peer Support Workers
at Sunshine Adult Acute Psychiatric Unit, Mid West Area Mental Health Service*

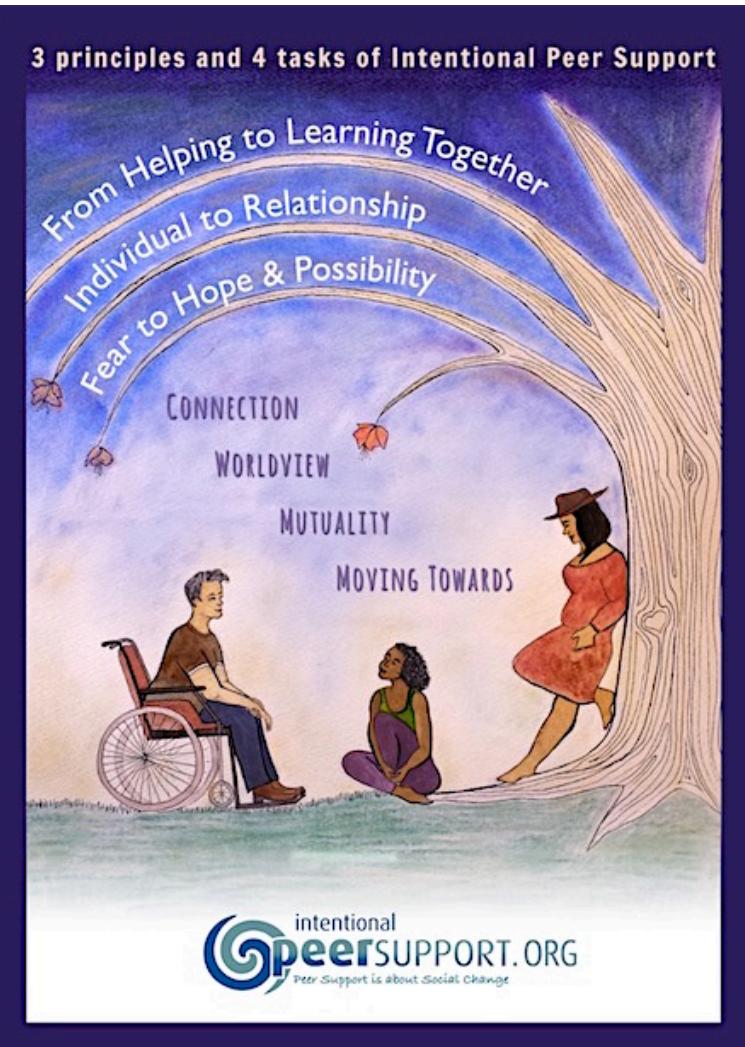
for 19th Victorian Collaborative Mental Health Nursing Conference 3rd August 2018

What will we talk about today?

- What is the model we practice within?
- What does peer work look like in practice?
- What are our peers areas of interest and expertise?
- How are we collaborating with other members of the team and building on interdisciplinary initiatives?
 - Nursing led initiatives
 - Social Work led initiatives
 - Occupational Therapy led initiatives
- How can we do this together?
- Why is environment and context so important?

What is the model we practice within?

Intentional Peer Support (IPS) www.intentionalpeersupport.org



WE HAVE ALL UNDERTAKEN TRAINING IN SHERY MEAD'S IPS

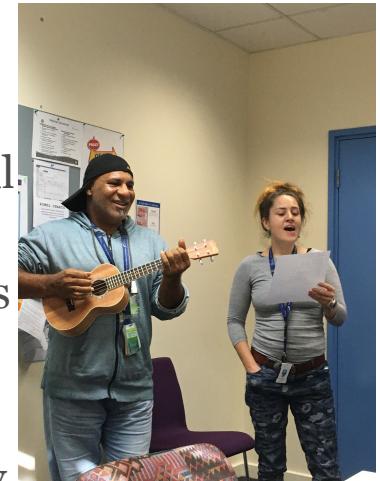
- The IPS model is based on:
 - three principles – from helping to learning together; individual to relationship; fear to hope and possibility AND
 - actioned through four tasks – connection; worldview; mutuality and moving towards.
- As a team we have adopted this model in all our interactions and are able to model the model in our work with consumers and their families.

What does peer work look like in practice?

- Initially funded until 30th June 2018, but now ongoing!
- 2.8 full time equivalent positions – split to employ 7 individuals at 2 days a week each PLUS a peer co-ordinator 2 days a week spread over 4 half days
 - Work standard business hours Monday to Friday – with at least two peers on any given day



- Focus is on reducing 28 day readmissions → a bit of a tall order that clinicians struggle to do!
- WE are visible on the unit – we don't wait for a 'referral'
- WE attend handovers, clinical reviews and morning meetings
- WE are in the staff area accessing and documenting in the medical record
- WE work one-on-one with inpatients and their families and carers
- WE facilitate groups
- WE work one-on-one with consumers and their families once the consumer has been discharged → face to face in public areas or by phone
- WE come together once a month as a team, we hold IPS co-reflection with the team and also with SUMITT QUIT peer worker



What are our peers areas of interest and expertise?



NARELLE

- Living in the now (mindfulness)
- Being kind to yourself (self compassion)
- Boring self care (everyday)
- Mutual help
- Post discharge support



SARE

- Making sense of your voices (hearing voices)
- Mental Health Act – patient rights, Advance Statements
- SMART Recovery (drug and alcohol)



SARAH

- Post discharge support
- Sew 'n' craft
- Art as therapy
- Music as therapy

HENRIQUE

- Time for a change (dual diagnosis)
- How do I stay out of here?
- Music as therapy



STEVE

- Physical health
- Surviving 40+ years in treatment and 20 years working with mental health workers
- Importance of cooking and eating together with consumers and their visitors
- Informal connections with those with psychosis



CHRIS

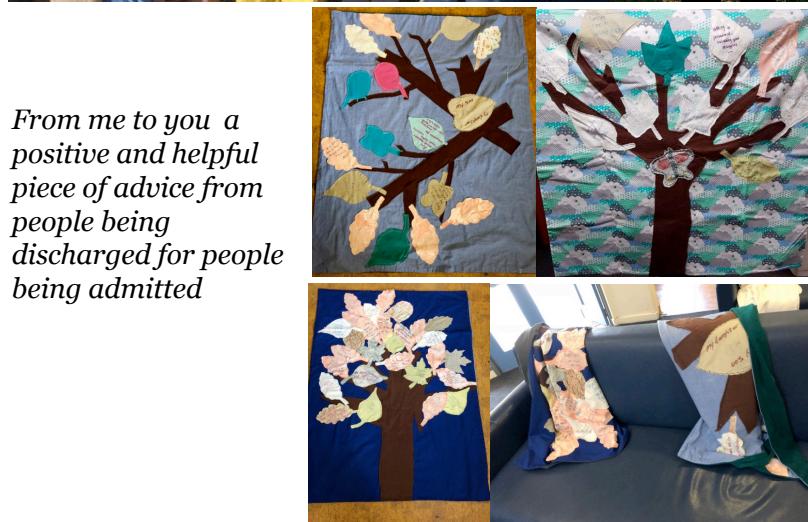
- Post discharge support
- 5 Ways to Wellness



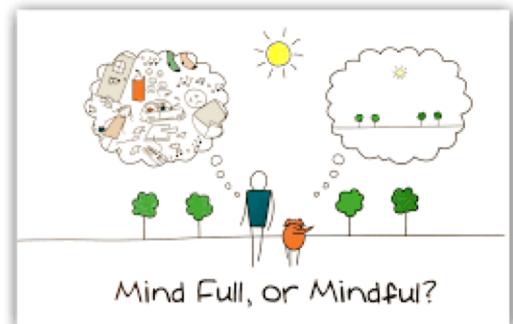
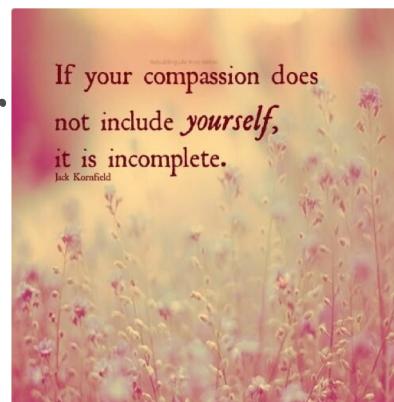
Nursing led initiatives

- Safewards interventions
 - that we are actively engaged with:
 - Know Each Other AND Reassurance
 - Discharge Messages AND Positive Words
 - Clear Mutual Expectations AND Mutual Help Meeting
 - Calm Down Methods
 - that we are indirectly engaged with:
 - Soft Words, Talk Down, Bad News Mitigation
- Medication information sheet for consumers and their families
- Sharing our experience and perspective with undergraduate nursing students

Our large canvas displayed on the wall in the communal area – it has our names and the days we work



From me to you a positive and helpful piece of advice from people being discharged for people being admitted



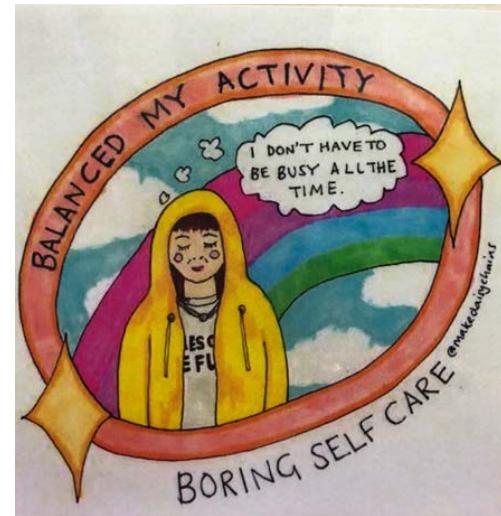
Mind Full, or Mindful?

Social Work led initiatives

- Co-facilitation of personal development groups
 - Making sense of your voices (hearing voices), trained in the VoicesVic approach
 - SMART recovery (drug and alcohol)
- In-services to staff on hearing voices approach
- Family meetings
- SAAPU family working group
 - SAAPU quick guide

Occupational Therapy led initiatives

- Utilise the UK OT, mental health and queer advocate ‘boring self care’ card series



- Active contributors to the meaningful activity program on the unit - planning, delivery and evaluation – alongside our resourceful OT (and previously our consumer engagement nurse)

How we can do this together?

- Using food, music and creativity to improve the experience – for everyone!
- Be genuinely curious – of each other, of our consumers and their families
 - Untold consumer and carer stories of clinicians
- Being reflective in our practice, being open to change and drawing on each others unique strengths
- Coming together to celebrate our successes, to support each other through moments of adversity and to share cake!
- By considering the potential points of difference and how we might approach the work

Consumer Cover Band (CCB)
Christmas performance

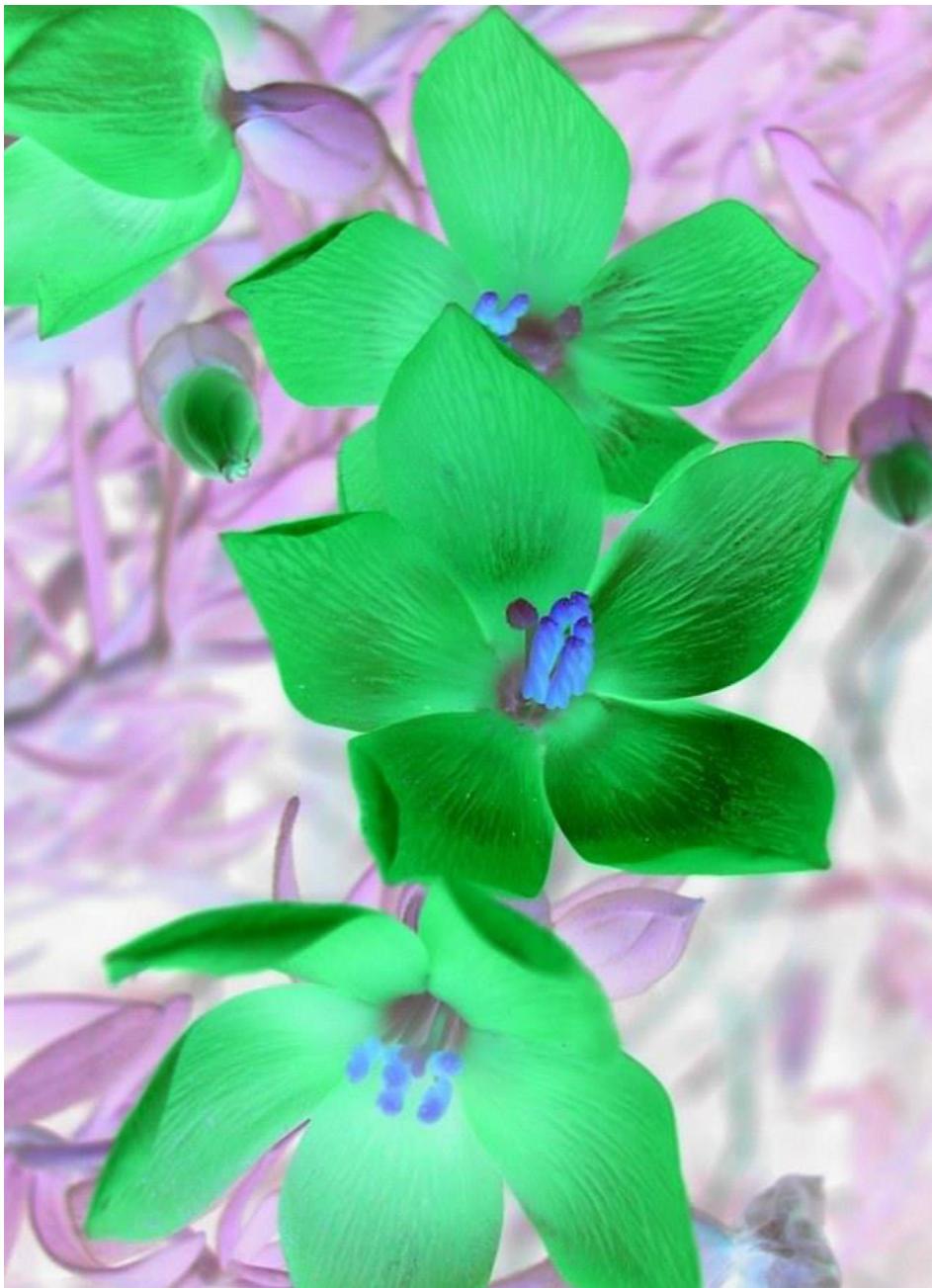


Monthly team day – cake for SAAPU staff



...a peer may	...a non-peer may
go onto the unit, say good morning and have a cuppa in the lounge with patients (on arriving at work (before shift starts))	go to the staff tearoom and have a cuppa (on arriving at work (before shift starts))
be curious – following conversation where ever it goes – unearthing an untold story	be assessing – directing conversation to elicit symptoms then redirecting once information gathered
actively listen without judgment or direction	listen with intent for assessment and treatment
know what it is like to be kept waiting and have to respond to tapping at the windows	be able to block out the tapping at the windows

Why is environment and context so important?



I am always reminded that growth happens in a context and that in order for growing things to emerge, environments must change to accommodate that growth.

One spring, after a long and icy winter, I wrote this:

It is springtime and hope is everywhere. It is springtime and it feels like all living things are trembling into being, still wet and new and fragile and determined to put down roots and grow.

I think of a sea rose I watched growing out at a beach near my home this past summer. It is a fragile and tender life, that sea flower. I love to see it. At dawn it moves in a slow upsway as it turns toward the morning star. That sea rose is a light seeker. It bends toward the light. It is a light-seeker whose roots reach way down into the darkness of the earth. In fact, it was in darkness that his new life began.

Way back in January and February, when the icy winds lashed across those dunes and the days were short and the light gave no warmth, even then, way down under the ground, this new life was waiting. Nobody could see it, nobody was there to witness it, and yet this promise of a sea flower waited. It waited in that icy darkness for the sands to begin to thaw. It waited for the rains to come and loosen the earth. And then, ever so slowly, it began to stir. Moving one grain of sand at a time, it began to grow.

It did not grow straight toward the light at first. No. First its growth sought a downward course, reaching, stretching, blindly groping through shifting sands to find a solid place. A place to be rooted. A good soil to cling to and to be nurtured by. A home soil that could sustain it even in driving rains and tormenting winds. And then, having rooted itself in this way, the sea rose began its journey toward the light. Poking through the darkness, that sea flower emerged tiny and lovely and insistent and courageous. On frail and trembling limbs, this small thing rose to a new life...

That sea rose teaches us a lot about hope. It teaches us that hope emerges out of darkness. It teaches us that hope can grow in nurturing environments that allow one to become rooted and secure. And I have come here today to celebrate the hope symbolized by that sea rose.

<http://www.patdeegan.com/pat-deegan/lectures/conspiracy-of-hope>