Co-design Report

24/7 Community Mental Health Hub





















Executive Summary



Our vision for the 24/7 Hub is a welcoming, calm and safe space for anyone in Acomb, Westfield and Holgate in need of support for their mental health.

A skilled, compassionate and connected workforce are available 24/7 to offer integrated clinical and community based services. Support is strengths-based and person-led with an emphasis on connecting people to their community; strengthening their existing care network; and helping people to build and utilise positive coping strategies through peer support, group work and carers support. Everyone receives a warm welcome on arrival and there are comfortable places to sit, private spaces and access to refreshments and outdoor space. The Hub is a nurturing, supportive and fun place within the community where people feel they belong and are welcome in good times as well as bad.

Project Overview	A summary of the Hub programme; what we set out to achieve in the co design of the 24/7 Hub and our process.	>
The Workshops	A detailed breakdown of each of our 5 codesign workshops including our key aims, activities and outcomes.	>
The Outputs	 A summary of our 24/7 Hub model 6 key principles to underpin the design and operation of the 24/7 Hub 8 characteristics to inform the design of the physical space Our vision for the physical space and how people will interact with it The outcomes we hope to achieve for the Hub's users 3 storyboards showing how a new user, regular user and user in distress might experience the Hub An outline of how the Hub will collaborate with the community 	>
Next Steps	Innovation Unit's recommended next steps, mapped against our key insights	>
Many Thanks	Acknowledgement of everyone that made this work possible	>
Appendix	 A map of desirable features and functions of the Hub 4 Personas, including safety seeking and crisis scenarios 	>

Project Overview



York is one of six Pilot sites that NHS England has funded to provide 24/7 mental health support in the community.

NHS England's vision for this 24/7 support is ambitious and aligned to the York Mental Health Partnership's vision for York. A city where:

- We all feel valued by our community, connected to it and can help shape it.
- We are enabled to help ourselves and others, build on our strengths, and can access support with confidence.
- We are proud to have a Mental Health Service that is build around our lives, listens to us, is flexible and responds to all our needs.



York's 3 Hubs

The 24/7 Hub is part of a wider vision to develop 3 Mental Health Hubs across the city of York.

Hub 1 - 30 Clarence Street

The first Hub is in the early stages of development at 30 Clarence Street, covering the North of the City. This is a daytime offer only. A codesign process was undertaken to develop the core principles, values and practice which underpin 30 Clarence St.

Hub 2 - 24/7 Hub

The second Hub will be located in Acomb Garth covering Acomb, Westfield and Holgate. This Hub will be 24/7 as additional funding has been secured as part of the national pilot. This report covers the co-design process for Hub 2.

Hub 3 - Future Hub

The third hub will be in the South/East of the City and will be a daytime offer only. Development of this Hub has not started.

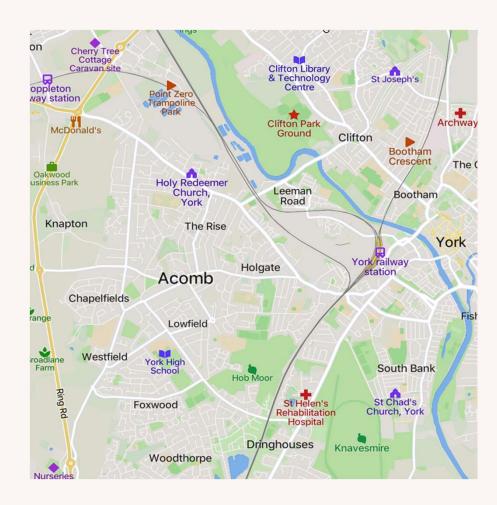


The 24/7 Mental Health Hub will serve the community of Acomb, Holgate and Westfield.

The area has a population of around 30,000. It has the highest levels of deprivation in the city, experiencing both health inequalities and social challenges.

The 24/7 Hub will offer support to those with a mental health need, including enhancing the provision for individuals who are already receiving a service or support in the community. Acomb, Holgate and Westfield are rich in community assets and provision, which the Hub will connect and collaborate with.

It is envisaged that the Hub will have a measurable impact on both physical & mental health outcomes.



The Brief

In September, System Leaders from across York met to set the brief for the Codesign process. It was agreed that the Codesign process would focus on the following questions:

What is the 24/7 Hub?

Including a shared vision, principles and values, support offers and desired outcomes for people.

How does it feel?

Including the user journeys, with attention to how the physical space promotes a sense of safety.

How does it work?

Including examples of how core value might be delivered with different levels of staff and access.

It was acknowledged that some questions about the 24/7 Hub fall out of the scope of the codesign process and need to be addressed by the system. These questions included topics such as comms, longer-term funding and how the Hub sits alongside other offers in the system.

What is Codesign?

Co-design describes active collaboration between stakeholders in designing solutions to a challenge, using the principles of service design to innovate and jointly develop a product or service.

Co-design brings together lived experience and professional experience to learn from each other and make things better - by design.

The 4 core principles of codesign can be summarised as follows - share power; prioritise relationships; provide multiple, accessible ways to take part; and share skills. We took time in our first workshop to consider these principles and articulate how we wanted them to apply to us.

Our guiding principles

- Work collaboratively together
- Listen to each other
- Ensure that everyone can contribute
- Make sure people have time and space to think
- Agree to disagree and challenge each other constructively
- Ask questions, stay curious and be open to new ideas
- Respect differences without judgement
- Create opportunities for everyone to build relationships
- Be ourselves
- Have fun

The People

The Codesign Group comprised of people with lived experience, community links and practitioners who live and work in York.

The group included:

- People with lived experience of mental health services in York,
- Residents of Acomb, Holgate and Westfield,
- Representation from key organisations working in the community mental health system including TEVW (Acomb CMHT, Crisis, First Contact Mental Health, MHSOP, 30 Clarence St), York Mind (including peer support at 30 Clarence St), York Carers, City of York Council (Local Area Coordinators, Mental Health Social Workers, Community Involvement Officer), North Yorkshire Police, York CVS, York in Recovery, Menfulness, Foxwood Community Centre.



The Workshops



The Process

The Codesign process involved 5 workshops over 3 months.

In the first Codesign Workshop the group came together to learn about the context, develop a shared vision and create a group agreement. We agreed to work collaboratively together, ensuring that everyone had time and space to think and contribute, ask questions, stay curious and have fun.

We held 4 workshops to design the 24/7 Hub for York.

The final workshop was an opportunity to share back the work of the Codesign group with System Leaders and representatives from across York, celebrating the hard work, creativity and thoughtfulness of the group.



Overview

WORKSHOP 1

Oct 8th Kick off

- Create a codesign group agreement
- 2. Establish a shared vision for the Hub
- Agree principles
 values

WORKSHOP 2

Oct 22nd Hub offer

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- The support offers the Hub will provide
- 2. The service principles
- 3. The desired outcomes for people

WORKSHOP 3

Nov 14th Hub feel

- 1. How we make people feel safe?
- 2. How we use the physical space?
- 3. How we support people in immediate need?

WORKSHOP 4

Nov 28th Hub function

- Bringing to life the insights
- 2. Experimenting with different models (including different levels of access and staffing)

WORKSHOP 5

Dec 19th Share back

Bring together a wide group of stakeholders to:

- Share the work of the co-design group
- 2. Think about next steps

Workshop 1 October 8th - Co-design kick off

Workshop 1 focussed on laying a secure foundation for the codesign process and establishing good working relationships.

This included, a thorough introduction to the project scope; space to reflect on our hopes for the project; agreeing a code of conduct to guide our time together and working together to articulate a guiding vision for the 24/7 hub.

Activities

- Introductory presentation and Q&A
- Exploring the 4 Principles of Codesign and how we want them to apply to our working
- Defining our vision for the Hub by reflecting on the strengths and weaknesses of existing 24/7 spaces and mental health services

A&E



McDonald's



Social media



Friend's house



Faith Centre



Samaritans



October 22nd - What is the 24/7 Hub?

Workshop 2 focussed on how we want the 24/7 Hub to support people with their mental health.

We introduced 4 personas and used adapted system design tools to explore the outcomes we might want for them and the types of interventions and approaches needed to make them a reality.

Activities

- Using the co-design team's experience to enrich our understanding of the personas
- Describing the change we'd like to see in 2 years time - what do they feel, have, do, need?
- Ideating around the kinds of support, both formal and informal that might help our users
- Breaking these down into support requirements for both the day and night offer.





November 14th - How does the Hub feel?

Workshop 3 explored how the Hub might meet the needs of its users when they are in distress.

We thought about how both the physical space and the services within might promote a sense of safety for people and staff, and help users presenting to the Hub in a state of immediate need. We also explored how we might remove barriers to access and inclusion.

Activities

- Explored what a state of immediate need would look like for our personas and identified key principles for support
- Created storyboards showing how the Hub might help our persona's to feel safe
- Identified the challenges and adaptations needed to hold these scenarios in one space

Paul presents with immediate need

Paul attends the centre after disagreement at home with h very upset and tells you that think he go home and live wi anymore.

While you are talking you rec is responding to people or th can't see. Mid way through hi is seen to be shouting 'shut u me alone' and pointing threa the room at an empty chair.



Safety in the Hub - Paul

Paul has been in the centre pacing and talking to himself. Every now and then he stops and shouts loudly 'F off and leave me alone' he is also yelling threats 'i'll kill you'.

A couple of other people in the centre have come to tell you that they are frightened and worry what Paul might do next. When you go to spark to Paul you realise he smells very strongly of alcohol.



November 14th - How does the Hub work?

Workshop 4 explored how the physical space might cater for multiple activities and user needs.

We broke into teams and focussed on three different models for the Hub:

- 1. An open access Hub focussed on prevention
- A referral based Hub focussed on intervention
- An open access Hub balancing prevention and intervention

Activities

- Each team worked to map out how their model might work at peak hours using a set number of staff and users, first in the daytime, then at night
- They then described the physical attributes the Hub would need to support this activity, including furniture, equipment, layout, decoration









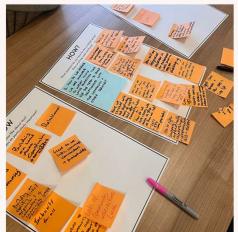
November 14th - Show and tell

Workshop 5 brought key stakeholders together to see our work and think about next steps.

We presented our work over 6 stations including, key principles, a map of the Hub in action, 3 users stories and a description of how the Hub would connect and collaborate with other services in the area. Our Lived Experience Experts were on hand to present the work and answer any questions.

Activities

- Introduction to the project and a break down of the codesign process
- Guests toured around the 6 stations, capturing their thoughts as HOW, WOW or NOW statements
- Coming together to capture our takeaways and actions going forward

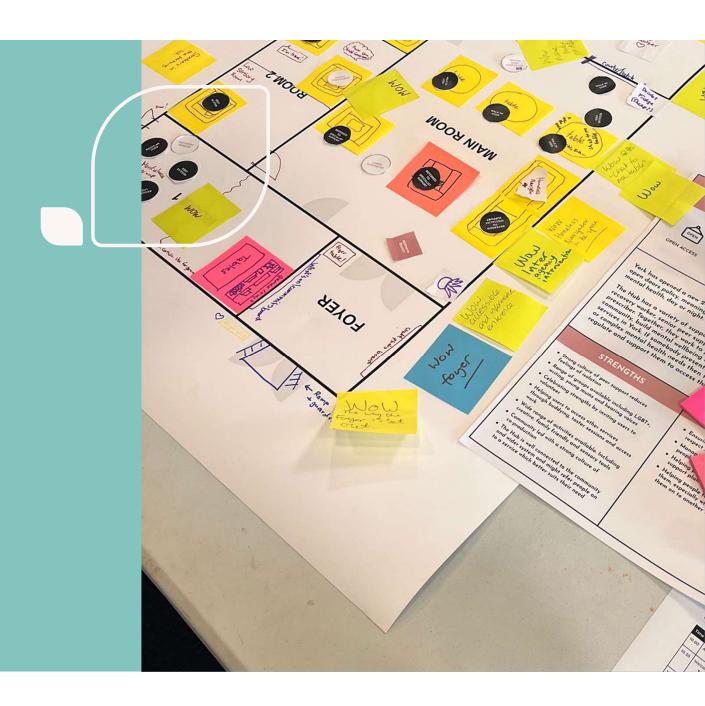








The Outputs



Model summary

Daytime offer: 8am-8pm

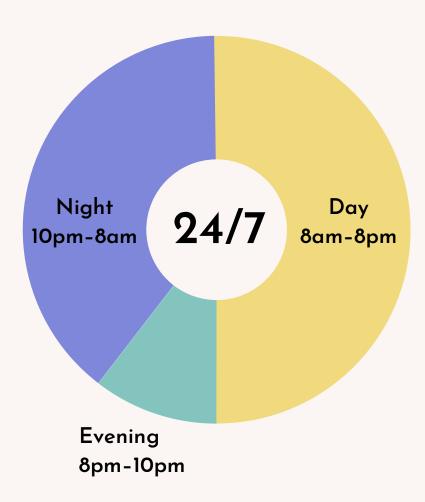
Full, multi-agency team providing appointments, cafe, groups and activities e.g. craft group, sessions to learn about mental health and wellbeing, welcoming conversations, peer support meetings

Evening offer: 8pm-10pm

Reduced team providing on hand to support people, plus community organisations hosting activities in the space. These include both social and support groups e.g. curry club, movie night, hearing voices peer group

Night time offer: 10pm-8am

Reduced team providing a quiet space with drinks and snacks available. Staff able to support with regulating emotions and facilitating activities e.g. craft supplies, board games



Key Principles

6 values to underpin the design and operation of the 24/7 Hub





Key Principle Inclusion

The Hub staff and building are equipped to meet people's accessibility needs, this includes a variety of refreshments to meet dietary requirements, accessible toilets, a quiet room for people with sensory needs, translation services and access to support through a variety of communication channels.

People's personal characteristics have no negative impact on how staff support them and staff are accommodating and attentive to people's preferences.



Key Principle Choice

Support is flexible and led by people's choices. For example, choice of room/environment, support staff, and communication channel.

People are given information on the support available at the Hub, as well as through other services and can choose when and how to involve others (e.g. loved ones, community and statutory services).

The Hub is open 24/7 and activities such as groups run in to the evenings and on weekends to accommodate those working or unable to access the Hub in the day.



Key Principle Understanding

Staff are non-judgemental and do not make assumptions about people, they ask open questions and invite conversations around what a person needs and wants from the Hub. For example, they do not assume that somebody struggling with their mental health is an unsuitable parent, and instead work to support that person to access the support they and their family want and need.

Staff are skilled, considerate and attentive, ensuring people feel their needs are met in a way which is responsive, calm and timely.



Key Principle **Equality**

Staff treat individuals as whole people not patients, understanding people's needs and choices beyond a diagnosis or label.

There are a range of groups available at the Hub (e.g. hearing voices, parents group, LGBT+ group and bereavement group) so that everyone can find a space to be themselves and find community.

Everyone who uses or visits the Hub must uphold the Hub's values to ensure the Hub is a safe and fair space that promotes the wellbeing of all.



Key Principle Strength

All staff work in a person-centred, strengths-based way. This means staff are able to support people to reflect on what has worked for them in the past and co-create plans for support that build on their skills and lived experience.

Staff work alongside people and are able to remind them of how far they've come and celebrate their gifts.

There is a strong culture of coproduction to ensure the Hub best meets the needs of people. People are supported to volunteer and share their skills at the Hub in a way that works for them.



Key Principle Community

The Hub has strong relationships with the community and other services. The Hub plays host to other services e.g. by acting as a space for Hub users to meet their external support workers or hosting sample sessions for other services.

Hub staff also work outside of the Hub building to support people out in the community. Staff work to strengthen user's networks of support, helping them to find community both in and outside the Hub. Support and sessions to learn about mental health and wellbeing are available for Hub user's carers.

Physical Space

8 characteristics to inform the design of the physical space



Physical Space

In order to achieve our vision for the Hub, the physical space must/could have the following characteristics



MUST

- Be accessible by car, bus, bike and foot
- Ensure a safe arrival and departure
- Offer free car parking close by including disabled parking

COULD

- Online map and travel instructions
- Be a well publicised location for taxis
- Be on direct bus routes from York city centre
- Have bike racks
- Have a staff car to drive people e.g. home, to A&E



MUST

- Be warm & inviting
- Be neurodivergent friendly
- Have calming colour palettes
- Be well maintained
- Be free from common triggers

COULD

- Have live plants & natural materials
- Have community art work on the walls



Physical Space

Space

MUST

- Include a mixture of spaces for a variety of activities (1:1, group activities, outdoor area)
- Have multipurpose rooms and furniture
- Be warm and easy to heat

COULD

- Be a space to gather people to celebrate
- Have room to have multiple groups and activities taking place at once
- Have temporary partitions to change room sizes



Physical Space Accessibility

MUST

- Be easy to use for those whose first language is not English
- Be assessed and advised for visual and hearing impairment, disabilities & neurodivergence
- Accessible / disabled / unisex toilets
- Be equipped with accessibility adjustments including: ramps, brail, wide doors, hearing loop, minimal echo, clear contrast for visual impairment, BSL provision
- Be actively welcoming to all communities in the West of York and inclusive to all those with protected characteristics



Physical Space Location

MUST

- Be easy to find while also protecting the privacy of users as they come and go
- Be in a central community location
- Be well lit outside
- Be respectful of people's privacy



MUST

- Have comfortable seating
- Have facilities for making drinks/snacks
- Have outdoor/garden space
- Have facilities for preparing a meal
- Have games, puzzles and computers

COULD

- Have a large screen/projector
- Have creative supplies e.g. craft
- Have regulation tools e.g. fidget toys, weighted blankets
- Have gaming consoles



Physical Space **Safety**

MUST

- Have a co produced approach to maintaining a sense of safety
- Have good lines of sight to allow for monitoring of safe behaviours
- Have clear information including guidelines for behaviour; and clarity around the Hub offer
- Be fire safe and first aid ready
- Have a specific space/role for welcoming

COULD

- Have security, alarms or CCTV
- Have lockable rooms and storage



Physical Space

History

MUST

- Be a positive, well-known community building
- Have a neutral history which doesn't trigger negative memories for people

COULD

 Be a space not associated with clinical/medical or social services

Mapping

During workshop 4, the codesign group worked in teams to map their vision for the physical layout of the Hub and how different numbers of users, staff, volunteers and visitors would interact with the space and each other.

The following pages contain a breakdown of the key and recurring insights as they relate to:

- Furniture + Features
- Principles + Policy
- Actions + Activities

These maps have been synthesised into one master map which can be viewed in the appendix of this document.





Furniture + Features

Each group prioritised **a positive arrival**. This included a well lit entrance way; clear signage inside and out, including a display in the entrance explaining what the hub is, what's on offer that day and who the team are.

There was also a strong focus on the communal space, with each group including **comfortable spaces to sit**. Each group created a multipurpose space with space to be social or sit quietly, and a variety of drinks, snacks and activities available. The groups also emphasised the importance of a **designated quiet room** and outdoor space.

Every design provided users with **easy access to resources**, including a community library; tools to help with regulation; craft supplies; a computer; and toiletries and period products in the toilet.





Principles + Policy

Each group was keen to ensure a sense of safety in the Hub for staff, volunteers, users and visitors. They agreed that key to this would be establishing a code of conduct to be displayed in the entrance and around the Hub. This should be co produced and regularly reviewed in order to stay relevant.

The groups identified that in order to create a warm and welcoming space, the hub will need to be **well staffed**. With members of staff having enough time in their schedules to "float" around the Hub, providing informal support and investing in relationships.

They also recognised the opportunity to build capacity in the Hub by providing users with opportunities to volunteer, take part in coproduction, and fundraising.

Practical examples:

- Admin to support staff to coordinate activities and use of space allowing staff to spend more time "floating"
- Community groups using the space make it feel active and vibrant
- Support to upskill users to become volunteers e.g. food hygiene for cafe volunteers, gardening club
- Opportunities to raise money for the Hub e.g. a sponsored walk
- Quiet space always available
- Hub values poster in the entryway and around the Hub

Actions + Activities

In addition to the timely provision of group and 1:1 mental health support, the teams all identified the importance of the following:

- The ability to utilise spaces in the community when needed and improve access to community activities e.g. going for a walk with your support worker or meeting a group of hub users at a yoga class
- The option for VCSE services to come into the space to run activities
- Opportunities to combat loneliness and isolation through social activities e.g. film night, craft groups, LGBT+ groups
- Specialist support drop ins e.g. legal and admin support, opportunity for friends/ family to receive support, low stimulation sessions for those with sensory needs

Practical examples:

- 1:1 support this may involve contacting loved ones, linking in to crisis support or making a plan for the morning
- Outdoor space used for community gardening
- Opportunities to eat together e.g.
 curry club, potluck, coffee mornings
- Groups focussed on psychoeducation,
 e.g. mindfulness, conflict resolution and
 symptom management
- Skills based classes e.g. cooking, parenting, craft
- Activities such as board games, puzzles, TV and craft supplies

User Outcomes

The outcomes we hope to achieve for the Hub's users



User Outcomes

Our aim for the Hub is that the following user outcomes would be achieved and sustained

People feel:

- Accepted
- A sense of belonging
- Listened to
- More hopeful
- Less isolated

People are:

- Engaging with meaningful activity e.g. work, training, volunteering or hobbies
- Connected with their community
- Connected with family and/or friends
- Developing their wellbeing and resilience

People have:

- Knowledge of their mental health and ability to support themselves
- Independence, choices and opportunities
- Supportive communities
- A safe place to be

People have ongoing access to:

- Services on offer in York
- Mental Health support
- Carers support
- Safety plans
- Opportunities to continue to develop and give back to the Hub community

User Stories

3 storyboards showing how a new user, regular user and user in distress might experience the Hub



User Story 1

New User

Grace is 18 and lives in Holgate. She's studying A-Level Music and has a unique style and flair. She's looking toward the future.

Grace lives with her gran and cat Bubbles. Her grandmother is very supportive emotionally and financially and she sees her Mum occasionally.

Grace keeps herself on a strict diet and exercise regime and stretches everyday, she dislikes her body calling it her 'skin bag' and sometimes cuts herself when she's feeling overwhelmed.

Grace has had some help in the past from a CAMHs psychologist, she is worried as they say they can't refer her back there a she is too old.



Grace's Story

New user coming to the hub for the first time.

Zoom in to view.







When Grace arrives at the Hub she is greeted by Kelly, who has been keeping an eye out for her. Kelly shows her around the hub and talks her through the welcome posters which include a menu of the kinds of support available, the Hub Values and key contact information.

Outcome: Grace has a clear understanding of what the Hub can offer



Kelly introduces Grace to Jan, the recovery worker, and offers to make them both a cup of tea. Jan says they have some materials to help them understand how the Hub can best support her and asks if Grace would like to take a look. Grace shares her interests, her struggles with anxiety and her Grandma's number as emergency contact.

Outcome: Grace feels listened to and reassured that she's in the right place.



Jan books Grace in to talk to the Mental Health Practitioner next week and suggests Grace stays for today's LGBTQ+ craft group. Grace borrows supplies and gets chatting to a friendly volunteer. She makes a clay model of her cat and notices it's nice to have something to do with her hands. This is the first break from her anxious thoughts she's had in weeks.

Outcome: Grace feels less lonely and her mental wellbeing is boosted



After the session, Jan congratulates Grace for all the brave steps she's taken today - coming to the Hub, working through the introduction materials and staying for the craft group. Jan shows her the Support Plan section and asks if Grace would like there to be clay on hand for her session with the Mental Health Practitioner next week. Grace feels seen and agrees.

Outcome: Grace is supported to access Hub services in a way that is tailored to her interests, preferences and needs.

User Story 2

Regular user at night

Paul is 39 and lives in Acomb with his mum. He loves film and sport and would like to have a family of his own one day.

Paul was diagnosed with Schizophrenia when he was 19 years old.

Paul hears voices, they are always there and sometimes they are louder than others. They don't always say mean things to him but sometimes they can make him feel scared.

Paul has always had a great relationship with his mum, who acts as his carer. Recently, with support from the Hub, she has started to enjoy evenings out with friends, while Paul spends the evening at the Hub, in line with his support plan..



Paul

Regular user accessing the Hub at night, in line with his support plan.

Zoom in to view.



After work, Paul takes the bus to the Hub. He walks into the lobby and rings on the inner doorbell. He looks at the displays and sees that his favourite peer support worker, Milo is working that night. He also picks up a flier for a group called Menfullness. Kelly, the Hub admin recognises him and welcomes him in.

Outcome: Paul feels welcomed and informed



Paul heads straight for the kitchen hatch and asks Jake, the kitchen volunteer for a cup of tea. He doesn't have to say 'milk and two sugars' - Jake knows everyone's preferences. Paul settles into a comft', chair and puts an his headphones everyone knows he likes to have some quiet time when he first arrives but they not and wave hello.

Outcome: The tailored routine makes it easy for Paul to settle in.



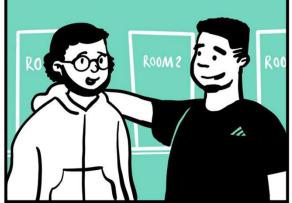
At 7pm everyone sits down for curry club. Kelly had text Paul earlier in the day to see if he wanted a particular order but there's always plenty of variety so newcomers feel welcome. The group discuss the Hub schedule for the next month and come up with new ways to recruit volunteers.

Outcome: Paul feels less isolated, is fed enjoyable food, and feels listened to.



After dinner, there is a Menfullness sample session in the big breakout room. A volunteer has come to share about what they do and the group have a discussion about men's mental health. Paul shares that he feels like he has to be strong for his mum, but is learning how to ask for help with his mental health without feeling ashamed.

Outcome: Paul is connected to services and enabled to access



After the session, Paul chats to Milo about his work week and Milo asks how things are going with the his new manager. Paul says much better and thanks Milo for the emotional regulation tips. Milo asks if Paul would like to help him run a new peer support group and he agrees.

Outcome: Paul's small wins and strengths are recognised and built on



Paul stays for a few more hours - helping to tidy up and then playing fifa with Miland a new comer. At 1]pm he gets a text from his mum to say she's on her way home. Milo orders Paul a taxi and he heads home.

Outcome: Paul stays as long as he needs and is supported to get home safe

User Story 3

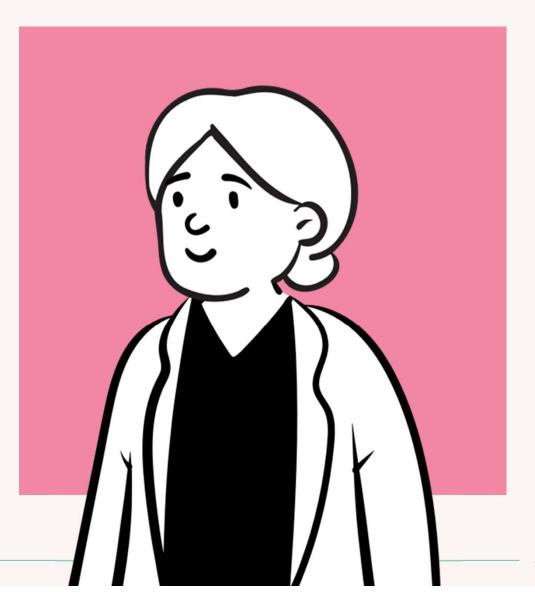
Regular user in crisis

Sarah, 43, is a loving single mother of 3 children under 10 years and part time art teacher at a local primary school.

She is deeply devoted to her kids and works hard to create a loving, nurturing environment for them, even though it takes a toll on her.

Sarah has a diagnosis of Bipolar and is currently struggling to stay well due to problems with family, money and childcare.

Sarah's ex-partner cheated on her many times, he left her when she was sectioned after the birth of their 3rd child, his parents are convinced she is not a good mother and often raise concerns about her to social services. She has a supportive relationship with her social worker and sister.



Sarah

Regular user coming to the Hub in crisis and bringing her young children.

Zoom in to view.



Sarah arrives at the Hub with her 3 children one weekend and rings the bell. Kelly, the admin assistant, checks the camera and sees that Sarah is in distress. She goes to welcome the family, and asks Pam, a Mental Health Practitioner, to come too. Together they welcome the family into the centre.

Outcome: Staff feel safe and are enabled to do their job well



Sarah is very distressed and states she is scared that she is being followed and that her ex husband is trying to take her children from her. The kids also appear upset. The conversation is hard to follow, Sarah is really hard to interrupt and does not look like her usual well put tagether self. Pam reassures Sarah that she did the right thing by coming to the Hub.

Outcome: Sarah receives strengths based support



Pam offers to take Sarah into a quiet room for a chat, but she doesn't want to let the kids out of her sight. Vera, the carer support worker suggests they all go into the garden so the kids can play while Pam and Sarah chat. The kids do some chalk drawing with Vera on the patio while Sarah and Pam sit in the covered area for a chat.

Outcome: Sarah and her family receive care in response to their needs



Pam and Sarah work through some of Sarah's preferred regulation exercises. As detailed in Sarah's support plan, Pam knows to let Sarah have a good cry and to talk out all her fears. While Pam listens, Sarah mentions that her new medication has been making it really hard for her to get a good night's sleep. Pam suggests they call her sister to see if she can help with the kids that night and books Sarah in for a medication review the next day.

Outcome: Sarah is supported utilising her whole support network.



Sarah is still shaken but feels calm enough to move into one of the quiet rooms for a nap while Vera looks after the kids. When Sarah's sister arrives to pick them up, Pam praises Sarah infront of her - soying how well she did to come to the Hub and ask for help, before double checking she has everything she needs to make her medication review tomorrow.

Outcome: Sarah receives support with planning and accessing hub services



The next day, Sarah returns, leaving the kids at home with her sister. Pam greets her warmly and they sit down over a cup of tea to look at her medication together. Pam realises that Sarah hasn't been taking her medication regularly enough. She talks her through the dosage label, helps her set some alarms on her phone and reassures Sarah she can come back anytime. Sarah is relieved to know there's a reason she's been struggling.

Outcome: Sarah receives timely access to a medication review.

Connections + Collaboration

An outline of how the Hub will work with the community



Nurturing Support Networks

Friends and family are welcome at the Hub. We know that people might want to bring someone along the first time they attend, or that a loved one may be encouraging them to seek support. We offer carers support and sessions to learn about mental health and wellbeing at the hub.

We help Hub users to develop resilience in their relationships by supporting them to manage conflict, communicate their needs and spend time together doing activities that promote wellbeing.

We recognise that many of our Hub users will be carers themselves. We work with them to increase their access to support services, both in and outside of the Hub. We welcome people bringing their dependants with them and offer ways to entertain or occupy them so that their carers can access the Hub's services.

Ideas for welcoming friends and family:

- New parent groups
- Toys and games for children
- Carer Support Workers
- Including dependants' needs and preferences in support plans
- Parenting courses
- Identify local activities and community events e.g. winter fair
- Child friendly drinks and snacks

Community Collaboration

Our vision is a Hub which plays a key role in the Acomb, Westfield and Holgate community. It's really important that the hub staff can go out into the community to meet people and to support people to access support offers and opportunities.

It's also essential that community organisations are welcomed into the hub, so that people can access support offers and opportunities in a place that feels familiar and safe. Most importantly the Hub won't duplicate anything that already exists, it will improve access and awareness.

Practical examples:

- Buddying up with other hub users to attend activities in the community
- Community services running regular and pop up sessions at the hub e.g. benefits support and sample sessions
- Community groups sharing information at the hub so that people know what's available for them e.g. posters and leaflets
- Peer support workers supporting people to attend community activities through recommendation and accompaniment
- Regularly updated digital and physical noticeboard

Other Services

The Hub has strong links with other services in York, they can work together to jointly provide a person with support, rather than passing someone between services. People who come to the Hub know that no matter what they will end up in the right place for them. Other services can contact the Hub for advice and vice-versa.

Potential Partners

- LACs
- Addiction
- Housing
- Crisis Team
- Menfulness
- IT reuse
- Housing Options
- Converge -
- Discovery Hub
- CRUSE
- York Carers
- Foxwood Community garden

- Ligison
- CMHT
- A&E
- Social care
- The Hut
- York MIND
- Andy's Man Club
- The Hub @ ClarenceSt
- Peasholme charity
- Employment support
- Community repair shop

- Police
- Probation
- GPs
- Gateway community cafe
- Digital York
- Library tech support
- Family Hub
- Methodist church gardening
- Haxby Community garden
- St NicolasGardening

The Importance of Communication

In every workshop, effective communication was raised as a key determinant in the success of the Hub. The following were highlighted as particularly important:



Be clear on the Hub offer - what is available + what behaviours are expected of Hub users Provide clear information about available services both in the Hub and community

Make it easy to contact the Hub in advance of arrival to enable smooth entry and reduce anxiety

Raise awareness of the hub through social media, online presence and printed materials Use entryway displays to help smooth arrival at the hub, including staff, events and rules Use multiple channels of communication – led by the preferences of users/carers

Next Steps



Key insights and recommendations

Next steps to achieve the vision, principles, space and outcomes for people set out in this report.

We have developed a roadmap with some of the essential next steps to help move from vision to implementation. We identified 8 particularly important insights (see right), which require further development. Against each insight are a set of recommendations (slide 49 - 56).

We have also collated these recommendations in a timeline, in line with current plans for delivering the 24/7 community mental health offer (page 57).

KEY INSIGHTS

- 1 There is an ongoing need for the codesign and codelivery of the Hub
- **2** Design and test policies that maintain safety in the Hub

- **3** Define the role of volunteers in the Hub and their experience
- 4 Codify and test effective staffing ratios and work patterns
- **5** Continue to explore collaboration with other community offers
- **6** Ensure safe and easy access to the hub for everyone
- 7 Support parents/guardians caring for children to attend the hub
- 8 Confirm the cohort to be supported by the 24/7 offer

There is an ongoing need for the codesign and codelivery of the Hub

Co-design, co production and ongoing development will need to be a core feature of the hub and the team will need to be supported to stay committed to co-design, learning and meaningful engagement with experts by experience.

CORRESPONDING RECOMMENDATIONS	TIMELINE	OWNERSHIP	PERMISSION	
RI: Involve co-design team in the set up of the hub (including, location and recruitment process)	Jan - Apr	Project team, Coproduction lead, Implementation group	Funding sign off - JDB	
R2: Develop processes and structures to ensure a long-term approach to co-design, user led decision making and collecting and implementing feedback to drive learning and development of the offer.	April onwards	Co-production champion, Managers w. input from Implementation group	Funding sign off - JDB	
R3: Develop IU orientation with Manager in line with the co-design materials	May	IU and Manager	N/A	
R4: Must develop digital policies and processes to support interoperability (data sharing agreements, shared care records policy and shared reporting arrangements) and enable the team to collect, collate and interpret impact data (evaluation framework, identified PROMS).	March - May	Implementation group and Manager	Sign off - JDB	

Design and test policies that maintain safety in the Hub

Safety of people using the hub and staff was an important priority for all members of the co-design team, but approaches to achieving this differed.

CORRESPONDING RECOMMENDATIONS	TIMELINE	OWNERSHIP	PERMISSION
R5: IU continue research into similar offers, feeding learning into development of safety processes. Collate information/learnings gathered from interviews into documents to share with JDB.	Jan - Feb	IU	N/A
R6: Adapt hub I operational guidance document and processes with new team manager. Feedback from co-design group on suggestions	Jan - April	Manager, Maddy and Implementation group	Sign off - JDB
R7: Pilot approaches and collect data - regular reporting on number of incidents, compare this with existing services and rapidly adapt if any issues	June - August	Manager and team	Report into JDB



Define the role of volunteers in the Hub and their experience

Volunteers were a key part of the co-designed model, enabling additional activities to run and areas such as the kitchen and garden to stay open. There are some outstanding questions about how this should work:

- What is our approach to recruitment and retention?
- What is our approach to training and supervision?
- What are the opportunities for development and progression?
- What is our approach to funding and coordination?

CORRESPONDING RECOMMENDATIONS	TIMELINE	OWNERSHIP	PERMISSION	
R5: IU to continue research with similar offers, feeding learning into development of plan for recruitment and retention	Jan - Feb	IU	N/A	
R8: Development of a Hub Volunteer Policy that outlines: - roles - responsibilities - expectations of volunteers - recruitment procedures - training - supervision - safeguarding guidelines	Jan - June	Manager w. input from Implementation group	Sign off - JDB	
 R9: System discussion around: Timeline for bringing in volunteers Funding opportunities Existing training for volunteers which could be accessed 	June	Implementation group	Sign off - JDB	

Codify and test effective staffing ratios and work patterns

The co-design group raised the importance of getting the staffing ratios right. This was particularly important for:

- Out of hours working, when risk might be higher
- Enabling the team to work in the community and home visit
- Sickness and holiday
- Times of high demand

CORRESPONDING RECOMMENDATIONS	TIMELINE	OWNERSHIP	PERMISSION	
R5: IU to continue research with similar offers, feeding learning into development of staffing plan	Jan - Feb	IU	N/A	
R10: Further data collection on cohort to understand whose needs are met by the offer (repeat assessments, those presenting out of hours)	Jan - March	Data group/Project team	JDB to monitor progress and support with access to data	
R7: Pilot approaches and collect data - Regular reporting on: busiest periods, complexity of need during night and day, staff sickness and reliance on bank staff.	June - August	Hub manager and team	Report to JDB	
R6: Adapt hub 1 policies and processes with new team manager. Feedback from co-design group on suggestions	Jan - April	Hub manager, Maddy, pilot implementation group, co-design group	Sign off - JDB	

Continue to explore collaboration with other community offers

Integration with the wider community and the other offers within the area is an essential part of the co-designed model. This involved both supporting people to attend offers in the community and inviting offers into the hub to run groups / sessions / activities.

CORRESPONDING RECOMMENDATIONS	TIMELINE	OWNERSHIP	PERMISSION	
RII: Review budget to include running community activities and coordinating joint working with existing community offers	Jan - April	Implementation group	Funding sign off - JDB	
R7: Pilot approaches and collect data - periods of protected time for staff in the working patterns to build relationships with community offers.	June - August	Hub manager	Report to JDB	



Ensure safe and easy access to the hub to everyone.

Access to the hub was an important theme, particularly to ensure that we are reaching people whose needs have previously not been met.

CORRESPONDING RECOMMENDATIONS	TIMELINE	OWNERSHIP	PERMISSION
R12: Provide clear communications and an option to call ahead, to ensure that people know what to expect	Jan - April	Implementation group	Funding sign off - JDB
RII: Review budget to include taxis to ensure safe transport at night	Jan - April	Implementation group	Funding sign off - JDB
R13: Develop documentation and code of conduct to support flexibility, such as meeting in the community, or attending with a carer or loved one	Jan - April	Manager and Implementation group	Sign off - JDB

Support parents /guardians caring for children to attend the hub

There was agreement within the co-design group that it is important to be flexible to meet the needs of different cohorts, including parents. However further development of this is required to ensure this is done safely.

CORRESPONDING RECOMMENDATIONS	TIMELINE	OWNERSHIP	PERMISSION	
R5: IU continue research into similar offers, feeding learning into development of plan for supporting parents	Jan - Feb	IU	N/A	
R14: Ensure policies and processes to support families safely	Jan - April	Manager and Implementation group	Sign off - JDB	
R15: Build relationships with family offers in the community, for alternative spaces to meet with parents	Jan - April	Manager and Implementation group		

Confirm the cohort to be supported by the 24/7 offer.

Confirm the cohort to be served by the 24/7 offer. Consider:

- Those underserved by the current system
- Need profile of people identified
- How inequalities are being tackled
- Any differences of who is in the cohort in hours vs. out of hours

CORRESPONDING RECOMMENDATIONS	TIMELINE	OWNERSHIP	PERMISSION	
R10: Further data collection on cohort including demographics, to understand whose needs are met by the offer (repeat assessments, those presenting out of hours)	Jan - Feb Data group		JDB support with access to data	
R16: Ensure staff have adequate training and orientation to recognise and work with the right cohort / levels of need	May	IU /Manager/ Implementation group	Joint delivery board	
R17: Develop communications to describe the cohort and inform system partners and referrers	July - August	Hub manager and Implementation group	Joint delivery board	



Recommendations timeline

JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG
R4: Must develor R8: Development processes R11: Review bud R12: Provide cle R13: Develop do conduct R14: Ensure politicamilies safely	esign team in the sop digital policies of the solunteer policies of the solunteer policies of the solunteer policies are communications occumentation and coices and processes on the solution of the solution	and processes icies and s code of to support	R3: Develop orientation R16: Ensure staff have adequate training R7: Pilot approaches and collect data Regular reporting on: Number of incidents compared with services Busiest periods Complexity of need during night are Staff sickness and reliance on bank Success of protected time for staff working patterns to build relationsh community offers.			lata. with existing It and day bank staff	
R5: IU continue R10: Further da						R17: Develop cor to describe the co	

Many Thanks



Acknowledgements

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Additionally, we would like to thank the project team – Kate Helme, Savanna Thompson and Hannah Keith, with special thanks to Co-Production Champion, Ben Hutchinson.

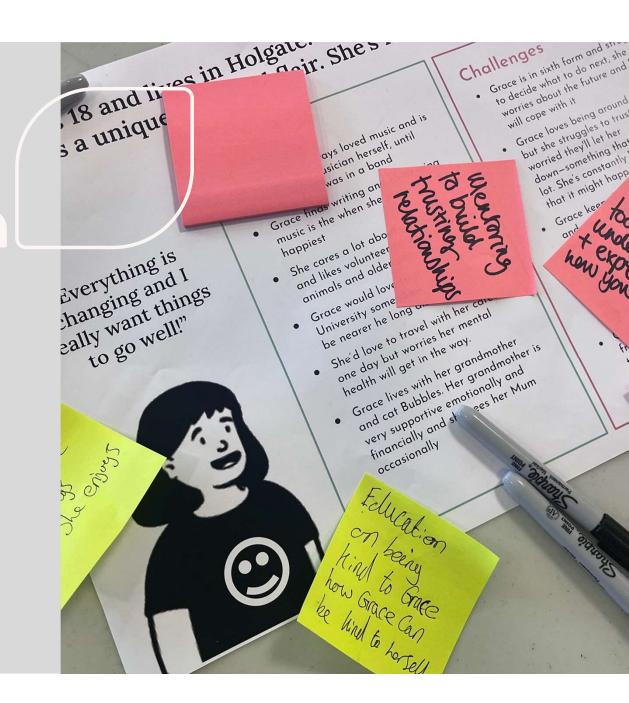


Creating impact
Reducing inequalities
Transforming systems

Project Lead
Co-design Lead
Head of Practice
Project Coordinator

Rachel Shapcott Bethan Mitchell Stacey Hemphill Frances Brown

Appendix



Synthesised Hub layout RESOURCE CUPBOARDS With toys, craft supplies, yoga ma QUIET ROOM **UNISEX LOO** Q)C **ROOM 2** OFFICE **ROOM 1** Williamounted William Woman HUB VALUES 80 **OUTSIDE AREA SD MAIN ROOM** FOYER KITCHEN RAMP 80 FIRE эламтэміт аин COMMUNITY BOOKSHELVES

Persona: Paul

Paul is 39 and lives in Acomb with his mum. He loves film and sport and would like to have a family of his own one day.

"I just want to feel better and have my own life"



Strengths

- Paul loves football, he used to play and really enjoyed it. He stopped and now thinks he's not fit enough to play.
- Paul knows everything about film. It's something his mum and him have always shared and enjoyed together.
- Paul has always had a great relationship with his mum, until more recently. They're very caring of each other and split the house chores 50:50
- He'd love to be able to move out but can't afford it currently as he's not been able to find consistent work.
- Paul would love to feel better and have more in life and maybe even start a family.
- Paul has a group of friends he's known since primary school but lately they've been drifting apart

Challenges

- Paul was diagnosed with Schizophrenia when he was 19
- Paul struggles with poor sleep, concentration and motivation and worries that people are talking about him.
- Paul hears voices, they are always there and sometimes they are louder than others. They don't always say mean things to him but sometimes they can make him feel scared.
- He had a difficult time at school and never really managed to find anything he was interested in and didn't do well in exams.
- Things have become really strained at home with Paul's Mum. She worries about Paul and his future. Paul wants to move out and his Mum worries he won't cope but isn't sure its a good idea for him to keep living with her

Persona: Paul

Safety in the Hub - Paul

Paul has been in the centre pacing and talking to himself. Every now and then he stops and shouts loudly 'F off and leave me alone' he is also yelling threats 'I'll kill you'.

A couple of other people in the centre have come to tell you that they are frightened and worry what Paul might do next. When you go to speak to Paul you realise he smells very strongly of alcohol.



Paul presents with immediate need

Paul attends the centre after having a disagreement at home with his Mum. He is very upset and tells you that he doesn't think he go home and live with her anymore.

While you are talking you realise that Paul is responding to people or things that you can't see. Mid way through his sentences he is seen to be shouting 'shut up and leave me alone' and pointing threateningly across the room at an empty chair.



Persona: Grace

Grace is 18 and lives in Holgate. She's studying A-Level Music and has a unique style and flair. She's looking toward the future.

"Everything is changing and I really want things to go well!"



Strengths

- Grace has always loved music and is a talented musician herself, until recently she was in a band
- Grace finds writing and composing music is the when she feels her happiest
- She cares a lot about giving back and likes volunteering especially with animals and older people
- Grace would love to study music at University somewhere down south to be nearer he long distance girlfriend
- She'd love to travel with her career one day but worries her mental health will get in the way.
- Grace lives with her grandmother and cat Bubbles. Her grandmother is very supportive emotionally and financially and she sees her Mum occasionally

Challenges

- Grace is in sixth form and struggling to decide what to do next, she worries about the future and how she will cope with it
- Grace loves being around people, but she struggles to trust them, worried they'll let her down—something that's happened a lot. She's constantly looking for signs that it might happen again
- Grace keeps herself on a strict diet and exercise regime and stretches everyday, she dislikes her body calling it her 'skin bag'
- One of her bandmates saw fresh cuts on her legs, they told her she had to stop hurting herself before she could be in the band again.
- Grace has had some help in the past from a psychologist, she is worried as they say they can't refer her back there a she is too old.

Persona: Grace

Safety in the Hub - Grace

Grace feels really unsettled about what has happened today and is also really upset and crying. Both things are making being in other people's company even worse.

She feels obvious, different, ugly and like everyone is looking at her and judging her. She wonders if she should leave but it is very late.



Grace presents with immediate need

Grace attends in the evening after having cut herself quite deeply. She has done an ok job of bandaging it up but it's still a big cut.

She tells you that she has had a really terrible day. As she was leaving school, someone in a car yelled at her and called her a 'disgusting lesbo'. Grace isn't really out to everyone and feels really unsettled about how this person would know something like that and what it says about her.

Grace is having really scary thoughts of suicide and has come to the centre beacuse she just doesn't know how to talk to her grandmother about what is going on in her head and she doesn't trust herself to be at home.

Persona: Priya

Priya, 76, is a proud mother of two daughters and has four grandchildren. She moved to York from Pakistan 40 years ago

"I want to be their mother again, the one they rely on, the one who holds this family together."



Strengths

- Priya is an exceptional cook. Cooking is an important part of her identity and her recipes have been passed down and perfected through generations.
- Priya is a loving mother and grandmother - she loves setting up dens under the dining table for when her grandchildren visit.
- Priya has a great relationship with her family. She has a wide network of family and friends but many of them live quite far away in the more ethnically diverse cities in the UK.
- Her husband is very supportive and loving but is still working and often has to do night shifts.
- When she can she spends a lot of time in the garden. She loves planting herbs and vegetables so that she can use them in her own cooking.

Challenges

- Priya has always struggled with anxiety and has regular panic attacks. She has always felt different and like she stands out in the community where she lives
- Priya she has been struggling to leave the house. She remembers the last time she went to the local shops she collapsed and an ambulance was called, they said she had a panic attack and told her to talk to her GP.
- Priya doesn't have any friends to the house and rarely talks to people on the phone unless her husband organises a call with the children.
 She misses her children and her grandchildren and wonders what the point of her life is.
- Priya doesn't really understand what's happening to her she feels worried all the time and unlike herself. She has picked her cuticles until they bleed.

Persona: Priya

Safety in the Hub - Priya

Priya has really struggled to make it to the centre, relying on her husband to drive her and come with her. When she is there she very much keeps to herself and commented that she feels like there aren't many people there like her.

One day while in the centre another hub user comes and sits next to her really close. He seems angry and makes comments about Priyas appearance. Priya gets up and moves, the man follows her and stands over her demanding to know what her problem is and why she moved.



Priya presents with immediate need

Things with Priya have been going well but she missed her last appointment and you were expecting her for her rescheduled session 15 mins ago. You call, Priya's husband answers the phone and tells you that he has stayed at home from work as Priya is not doing well. She is not sleeping or eating. She is refusing to take her medicine, she is sitting in the chair in their bedroom in her pyjamas wringing her hands and crying.



Sarah, 43, is is a loving single mother of 3 children under 10 years and part time art teacher at a local primary school.

"I just want to be happy and provide a great life for my kids"



Strengths

- Sarah is strong and able to navigate life's challenges, often surprising herself with what she can overcome
- Despite feeling overwhelmed, she remains committed to creating a happy, stable life for her and her children.
- She is deeply devoted to her kids and works hard to create a loving, nurturing environment for them, even though it takes a toll on her
- Sarah finds joy in teaching and loves to make a positive impact on her students, believing in their potential
- Sarah has cultivated a small but supportive network of friends and family that help her keep going, she worries she asks too much of them

Challenges

- Sarah has a diagnosis of Bipolar and is currently struggling to stay well due to problems with family, money and childcare.
- She is currently experiencing a higher mood then normal, she is not sleeping or eating as well and has had some recent absences from work
- She is struggling with money as she can only work part time she has fought really hard to keep in work and is adamant she won't stop.
- Sarah's ex-partner cheated on her many times, he left her when she was sectioned after the birth of their 3rd child, his parents are convinced she is not a good mother and often raise concerns about her to social services
- Sarah is terrified of losing her children and spends a lot of her time trying to make everything perfect so nothing happens to her family

Persona: Sarah

Safety in the Hub - Sarah

Sarah has come to the centre with her 3 children. You really need to have a conversation with Sarah privately to understand better what is going on but she is reluctant to be separated from her children.

Her baby is crying and the two older children seem restless. She's distracted by them and struggling to concentrate on what you're saying.



Sarah presents with immediate need

Sarah arrives in the centre with her kids at 7am. She is very distressed and states she is scared that she is being followed and that her husband is trying to take her children from her.

She says she knows this because she saw their car near the school at pick up time yesterday. Sarah has packed a bag for the kids and states she cannot go home as she knows they are watching her place.

Sarah seems really distressed, the kids also appear upset. The conversation is hard to follow, Sarah is really hard to interrupt and does not look like her usual well put together self.