



Board of Directors

Subject	Executive Directors Report – Quarter 4 2023/24
Date of Meeting	April 29 th 2024
Author	Lois Sidney
Purpose	For Discussion

Staffing

Vickie has now left to take her maternity leave and will return at the beginning of May 2025. We all wish Vickie the very best in her first year as a new mum.

We are still actively advertising for the social media and marketing maternity cover for Vickie. We are advertising for a 0.4 FTE (30 hour a week) post for eleven months, as Rachel will be taking on one day to cover the essential Keep Your Head work. We have had some interest in this role and hope to have someone in place soon.

We are joined by Sue Nicol who will start on May 1st 2024 as co-production facilitator for a drug and alcohol role of 0.2 FTE (15 hours per week) for a fixed term of one year, based in Peterborough and funded by Peterborough City Council. The interview panel included Jamie, who has his own lived experience of drugs addiction. KC will support the embedding of this role as venturing into Peterborough is new territory for the SUN Network in terms of drugs and alcohol.

Kate will increase her hours to 30 hours a week from May 1st until 31st March 2025. This will be split between 20 hours of co-production co-ordinator funded by the Postcode Lottery money, and 10 hours for the Inpatient Transformation Culture of Care workstream funded by the Integrated Care Board (ICB) which is NHS funding.

We have recruited a 20 hour a week one-year fixed term role to work alongside Kate on the Inpatient Culture of Care work. Agata Polikowska will be joining us on May 1st 2024.

Quarter 4 Headlines

New workstreams

Inpatient Transformation – Culture of Care



There has been a national piece of work around improving inpatient experience for people with mental health (including people with learning disabilities) and The SUN Network has been awarded some funding to carry out the co-production work within the local Culture of Care work. This will be alongside Voiceability who will involve people with learning disabilities. The local inpatient beds are at Edith Cavell hospital in Peterborough, and Fulbourn hospital at Cambridge. Both operated by Cambridgeshire and Peterborough MHS Foundation Trust (CPFT) This piece of work will be contract managed through a contract variation with our main contract held by the NHS.

Drug and Alcohol role in Peterborough

This two day a week role is to help people with lived experience of drug and alcohol challenges to influence and shape how the recovery support in Peterborough is delivered. This is new funding from Peterborough City Council and is currently fixed for one year. This will be contract managed through the following set of KPI's by one of our current drug and alcohol commissioners Joe Keegan, and again will be a contract variation.

WORKSTRAND	ACTIVITY
Feedback from service users	Get feedback from 3 service users per quarter to inform contract meetings on CGL experience
Telling service user story	Recover 2 videos per quarter on service user's story to challenge stigma
Linking clients with mutual aid	Record all those referred to mutual aid (benchmark in year 1)
Representation at meetings	Represent at 12 CGL & commissioner meetings across the year. 25% with service user attendance
Signposting service users	Record all those signposted to treatment (benchmark in year 1)
Consultations	Undertake 2 service user consultations per year
Championing	Production of 2 newsletters per year
Events	Attendance at 4 wellbeing/public facing promotional events per year
Interviews	Support service users to attend 4 interviews per year as and when opportunities arise



Attendance	<p>Attend weekly at 1 of following venues weekly on rotation;</p> <ul style="list-style-type: none"> ○ Fletton Recovery HUB ○ CGL Breakfast Club ○ Garden House Day Centre ○ Outside Links/ ○ CFO Hub ○ Recovery College East ○ Other groups/activities as yet unidentified
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ADHD pathways

We are currently supporting three people with lived experience of accessing the ADHD pathways to be involved in the ongoing work with Norfolk and Waveney ICB and Cambridgeshire and Peterborough ICB to improve patient experience, particularly surrounding the Right to Choose option which is the patients right to choose a private psychiatrist to perform their ADHD assessment, funded by the NHS. The hope is that the pathway will be more accessible, more streamlined and seamless.

Mental health Supported Accommodation

We will be working with Cambridgeshire County Council (CCC) to review the mental health supported accommodation in Denham Place and Fern Court now that P3 have been operating the service for nearly a year. Early conversations to review the questions asked have been completed with commissioners and it is anticipated that this work will be completed by June 2024.

Staff updates

Older People’s Mental Health (OPMH) update from Rachel Nightingale

I’ve been doing a lot of creating connections this quarter and trying to expand in to visiting not just dementia, but also mental health support groups and services. I am still getting around all of the Cam Sight groups, there are 13 in total, and they have proved very fruitful in terms of feedback and open conversations around mental health, and mental health and sight loss.

I’ve met with Cambridge Older People’s Enterprise and will be delivering a talk to them around what The SUN Network do, this has also created a link to the NHS Retirement Fellowship where I’ll be doing a talk for them as well. I have tried to reach out to Fenland to get a well-rounded view of feedback, with some marginal success. But



mainly have managed to connect with professionals: Area Managers of OPMH, inpatient wards at Peterborough, East Cambs Social Prescribers, Age UK Warden Scheme and the Heart and Soul Team within CPFT who cover the whole of Cambridgeshire and Peterborough.

The transformation board will also be a long-standing feature where are able to include people with lived experience, and there are actionable workstreams now coming out of that relating to dementia and inpatient quality, which we are, and will be involved in

Drug and Alcohol Addiction update from KC Cade

Patterns of feedback are developing around appreciation for the Cambridgeshire Recovery Service (CRS) drop-ins and the community found there:

‘... I feel accepted, glad to not be judged by CRS’

‘...being in a supportive environment offered by CRS/CGL really helps’

‘...had a very tough time over the weekend but managed to avoid drinking and CRS helps me to find that strength’

Our positive impact for people with lived experience continues to grow as we become better known by them, staff, and volunteers in the recovery communities. Individuals with problems around their drug and alcohol support have felt safe to talk to myself, as I help them feel heard and reassured so they can raise a complaint without fear of their support being negatively affected. This doesn't happen often, but when it does, it's important that people feel able to complain in a safe environment and without fear of their support being adversely affected.

There has been one amber drug alert this quarter which The SUN Network shared on their social medias.

Update from Anne Wigglesworth – Co-production Facilitator.

- Giving a focus on the Gypsy, Roma and Travelling community. Attending their social events, such as horse fairs and drop ins to gain their trust and hear feedback, perceptions and challenges around mental health
- Engaging with carers, who care for loved ones with mental health challenges; listening to the challenges, gaps and barriers they experience around getting support for those they care for
- Completing and finalising the Personalised Care and Support plan (PCSP) Following up on how those with lived experience felt about using the PCSP and their thoughts on it as a tool to assist with their goals and objectives
- Attending wellbeing events, hosting a SUN Network stall to promote awareness of our work
- Attending trauma training to help with creating a trauma informed system



Update from Joanna Grimmer – Co-production facilitator

The Involvement Forum has been paused temporarily due to several key members having to take a step back from the group due to various reasons (full-time employment, family responsibilities, mental health illness). We will need to re-advertise the opportunity to gain more members. This does allow me to spend more time working individually with some members on their personal projects such as sharing their stories.

I have been continuing to expand my Huntingdonshire contacts by attending networking events and meeting up with groups/individuals involved in local groups. I have particularly focused on St Ives and St Neots and have built up good relationships with the Integrated Neighbourhood Project Managers in both areas. This has created some great contacts and has precipitated several professionals (CPFT, HDC, Community Pharmacy) asking to learn more about The SUN Network and to obtain our resources.

I attended the Suicide Prevention Strategy Implementation Group meeting and their following workshop which helped me get a better understanding of the local and national plans for suicide prevention for the next year. I now have connections with CPSL Mind's STOP Suicide campaign manager and an individual with lived experience of bereavement by suicide who is keen to get involved in future projects. I am also excited about being involved in the Armour Project launch in St Neots which focuses on educating and supporting people who self-harm. They are using our 'Keep Your Head' cards as part of their 'After-Care Package' in tattoo studios.

Update from Kate Honan – Co-production Facilitator

This quarter I've been working to contact services that provide mental health support for Women in Peterborough. This has led to making good contacts within the area and with local groups. I have been invited along to Extended Hands women's group in Peterborough to give a talk on what The Sun Network does and to talk to women about their own lived experiences of using the services. I recently visited the owner of the Happy Muma Hub in Brampton which offers lots of different groups to parents and their children. We are working together to get a group of mums that have suffered with perinatal mental health challenges to hear their experiences. I have attended Working Together for Change facilitator training in preparation for Cambridge County Council's Future Care program. This is partnership working entailing being a facilitator for The Adults Social Care's operational arrangement to see whether they produce the best outcome for people. I continue to attend monthly meetings with the East Cambridge Mental Health Collaborative and Mental Health Early Intervention and Prevention board. These meetings give lots of insight and knowledge that I can pass on to the team and share on our social media.



Home Care Retender

This is a workstream commissioned by Cambridgeshire County council (CCC) and is around co-production of Home Care – which is the personalised support received in a service users' own home to support with washing, dressing, or cooking, cleaning, activities, taking medication etc. The retender focuses on three areas of home care:

- Complex Learning Disabilities
- Mental Health
- Generic care of people aged 65+

The SUN Network are facilitating involvement for people to input into the specifications for each service, followed by asking questions for the retender and then scoring the retender and attending an evaluation workshop. We are currently at the reviewing specifications stage. **Update Q3.** This work has been pushed back by CCC and in the meantime, The SUN Network has run a short survey to try and hear from more people.

Recruiting to this involvement opportunity has been quite difficult with only four survey responses and seven people involved in the work overall. It is anticipated that the scoring element of this work has been delayed again, however, there will be a workshop in March for the commissioners to meet with the service users to explain the delay. **Update Q4:** We hosted another workshop for people with lived experience to speak with the commissioners and for the commissioners to ask focused questions.

Training

We have some dates booked in for next quarter to provide co-production training for Peterborough City Councils Adults Commissioning team.

For our own learning, the team have attended cultural sensitivity training and were lucky enough to have Iqra Saeed, who is a local lady of British Pakistani heritage come along to speak with the team on two occasions around her culture and beliefs and was extremely receptive to all of our questions. It was a really valuable and insightful experience that we all thoroughly enjoyed.

Co-production

Last quarter, Lois and David attended Anglian Ruskin University to give a lecture on Co-production to third year Psychology students. This was attended by approx. 30 students. We recently heard from the university tutor that one of the students that attended our lecture offered the following feedback:

'I recently applied for a management position with a charity and was asked to present how I would incorporate co production into my role. Prior to your module I never heard of co production let alone how to apply it. Thankfully, I took your module and was able to learn this, which has led to a wonderful job offer.'



It is great that organisations are asking for people to think about how they will co-produce in their role.

Kate Honan's new role as co-production co-ordinator will incorporate the following:

- Delivering co-production training
- Populating the www.coproductiontogether.co.uk website
- Raising awareness of co-production and the importance
- Sharing positive examples of co-production
- Developing an induction course for people with lived experience to help them understand co-production, the integrated care system and how and where they can influence

The results of our co-production survey to see what the local knowledge and understanding is will form part of our Annual General Meeting (AGM) later this year.

Last quarter we raised that there had been a lack of ICS co-production opportunities, within the ICS. There have been more opportunities this quarter, particularly around older people and inpatients.

Signposting

We continually try and signpost people to support. We have been offering the A3 Wellbeing posters both in person and electronically to places across the county. The uptake is really positive, and we recently were able to have them displayed in pharmacies. We are also signposting on FB and social media.

Co-chairing the Coproduction Collaborative

The co-production collaborative has had fairly good attendance and regular system updates, however, there is still not much co-production happening locally. There is frustration around the disconnect between the co-production collaborative and the ICS/ABU. There has been some positive connection between the group and the ICB around carers strategy.

Social Media, Websites and Marketing

We continue to raise our profile on social media with increasing followers.

Meetings, networking, raising awareness, or representing lived experience: (meetings in bold type are new additions)

Reason for attendance – Drugs and Alcohol = D&A, Mental Health = MH, Older People = OP

- Adfam – Kinship Training



- **ADHD pathways meeting**
- Adult Social Care Forum (CCC) (MH)
- **Armour Project, St Neots (MH)**
- Birth & Beyond (D&A, MH)
- Blackfield Creatives (D&A)
- **Buds Fitness – Sawtry (MH)**
- Cambridge Mental Health Network meeting - third sector networking meeting for Cambridge (MH)
- Cambridge Recovery Service (part of Change Grow Live) (Cambridge, Hunts, Wisbech) (D&A, MH)
- Cambridgeshire and Peterborough NHS Foundation Trust Recovery College East (D&A, MH)
- Cambs City operation group, rough sleepers and homeless (D&A)
- **Camsight meetings (MH, OP)**
- **Caring Together Drop-in, Ely (MH, OP)**
- Community Mental Health Steering group (MH, OP)
- **Community Pharmacy (MH)**
- Community Strategic Transformation Partnership (MH, OP)
- Co-production Collaborative (MH, D&A, OP)
- Countywide drug and alcohol delivery board (D&A)
- Countywide harm reduction group (D&A)
- **CPFT Recovery College East (D&A and MH)**
- **CPSL Mind Good Mood Café St Ives (MH)**
- **CPSL Mind Good Life Board (MH)**
- CPSL Mind Operations meeting (MH, D&A, OP)
- Creative Fenland (D&A)
- Crisis Strategic Transformation Partnership (MH)
- Dementia pathway redesign (OP)
- East Cambs Mental Health Collaborative (MH)
- FENHMAN Meeting – Fenland 3rd sector networking meeting (MH)
- Ferry Project (D&A)
- Fitness Rush, Hunts (and Fens) (D&A)
- **Gamcare (D&A)**
- Good Life Board (MH)
- **HDC Community Spaces/Chest (MH)**
- Health Alliance – Hunts forum (MH, OP)
- Healthy You (D&A, MH)
- **Huntingdon Community Swap (MH)**
- **Hunts Integrated Neighbourhood Project (MH)**
- Justice Safeguarding Panel (D&A)
- Keep Your Head website refurb (MH, OP, D&A)
- **Mental Health Early Intervention and Prevention (MH)**



- Mental Health and Learning Disabilities Collaborative Board (MH, OP)
- Mental Health Priority – ICS strategy steering group
- Meridian PCN practice network meeting – connecting services with the meridian practice (MH, OP)
- Moody Mondays (MH)
- **Mortality Review Meetings (D&A)**
- People & Animals (MH, D&A)
- Personalised Care working group (MH, OP)
- **Places for People, Supported Living in Alconbury (MH)**
- PMAN – 3rd Sector Networking for services in Peterborough (MH)
- Recovery writing @ the Edge café (D&A)
- **Riverport Business Club, St Ives (MH)**
- **St Ives Cares Network Meeting (MH, OP)**
- **St Ives Knitting, Crochet and Crafts (MH, OP)**
- St Neots Integrated Network Project Group (MH)
- Substance using offender's pathway (D&A)
- Suicide Prevention Strategy Implementation Group (MH, D&A, OP)
- Traveller/Gypsy/Roma drop in – Cottenham (MH)
- **Warm Welcome Drop-in, St Ives (MH, OP)**
- Wisbech Integrated Network Project Group (MH)
- **Wood Green Animal Shelter (D&A)**

The SUN Network continue to represent the Voluntary, Charity and Social Enterprises (VCSE) Health Alliance at the Mental Health, Learning Disability and Autism (MHLDA) Accountable Business Unit (ABU). This means that Lois attends the ABU and feeds back to the small group of Health Alliance reps. Any questions raised by Lois about the work of the ABU are taken up by Health Alliance.

Performance against Key Performance Indicators (KPIs)

The KPIs were updated by the commissioners partway through Q3 (November) and data is now collated monthly. The data set has changed from previous quarters and is now reflecting the new KPIs.

There is a separate data set for The SUN Network and the Keep Your Head work.



KPI #	Description	Q1	Q2	Q3	Current Quarter			Year End Target/Actual RAG rating
					Jan	Feb	March	
KPI 1 Target		N/A	N/A	210	70	70	70	840
KPI 1	How many people have accessed the service overall? (including system professionals)			353	101	189	204	1862
KPI 2 Target		N/A	N/A	195	65	65	65	750
KPI 2	Number of views gathered across adults and OPMH			258	90	93	90	1177
KPI 3 Target		N/A	N/A	60	20	20	20	120 for 6 months
KPI 3	Number of meaningful engagement opportunities offered			59	11	20	29	119
KPI 4 Target		N/A	N/A	45	15	15	15	90 for 6 months
KPI 4	Number of times people are signposted to relevant organisations			62	16	15	29	122
KPI 5 Target		N/A	N/A	45	15	15	15	180
KPI 5	Number of people aged 65+ accessing the service			53	40	17	21	280
KPI 6 Target		N/A	N/A	15	5	5	5	60
KPI 6	Total number of system (ICS) meetings and boards service users are representing themselves at through The SUN Network			25	6	5	7	87
KPI 7 Target		N/A	N/A	15	5	5	5	60
KPI 7	Total number of system (ICS) meetings and boards that The SUN			53	16	12	21	160



	Network represent service users at and promote involvement and engagement at.							
KPI 8 Target		N/A	N/A	2			2	8
KPI 8	Deliver two co-production training sessions per quarter			2			2	8

January's meaningful engagement numbers were low due to there being no opportunities offered within the ICS. This was discussed with the commissioners and more opportunities have arisen since this point.

Demographics

Area	Detail	Q1	Q2	Q3	Q4	Year to Date	EoY target	RAG rating
Views gathered	Substance Misuse	24	28	53	26	131		
	Mental Health	101	143	172	84	500		
	Both e.g., dual diagnosis	117	9	35	12	173		
	Older People	44	103	45	41	233		
	Other/unknown	24	53	56	7	140		
	Total	310	336	361	170	1177	750	
	Cambs City	95	151	60	34			
	Cambs South	6	3	50	9			
	Cambs East	1	9	35	19			
	Huntingdon	57	77	126	56			
	Fenland	16	25	13	12			
	Peterborough	55	26	53	24			
	Other/Unknown	80	45	24	23			
	Total	310	336	361	170	1177	750	



Sentiment of feedback

	Q1	Q2	Q3	Q4	TOTAL
Positive	161	119	118	48	
Negative	46	124	88	51	
Mixed	86	65	95	43	
Unclear	1	6	5	4	
No sentiment	13	22	55	23	
Not Applicable	3	0	0	1	
TOTAL	310	336	361	170	1177

Demographics

Age	Number of people				Age	Number of people			
	Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4
Unknown	132	128	203	92	40's	35	36	27	10
Under 18	5	0	0	0	50's	25	31	30	18
18/19	4	0	1	0	60's	19	30	11	18
20's	26	33	23	9	70's	17	22	30	10
30's	37	28	28	11	80's	10	28	8	2
Total						310	336	361	170

Gender	Number of People			
	Q1	Q2	Q3	Q4
F	172	187	190	46
M	68	89	106	32
Other/self-describe				



Unknown	70	60	65	92
Total	310	336	361	170

Ethnicity	Number of People			
	Q1	Q2	Q3	Q4
W	117	136	144	99
Unknown	180	171	177	76
Gypsy/Traveller	6	5	16	4
Asian/ British Asian	5	12	14	19
Black British	1	2	0	0
Black Caribbean	1	0	1	0
White other	0	10	9	0
Total	310	336	361	170

Keep Your Head Data Set

KPI #	Description	Target Q4	Actual RAG Rating
KPI 1	Number of hits on the adults keep your head website per month	30,000	49,284
KPI 2	Number of hits on the CYP keep your head website per month	15,000	23,723
KPI 3	Number of posts about services or community support on social media per month	12	12
KPI 4	Number of keep your head news page updates per month	8	8

Engagement and Involvement:

We gained feedback from 1177 people across the county in this quarter about their experience of accessing or trying to access mental health or substance misuse services.

Feedback themes:

Many of the themes are unchanging as they have not been eliminated or decreased enough to no longer be thematic system-wide issues. However, new feedback around **ADHD** shows how people are struggling to access the services and in the case of the



individual below who was told by CPFT that they wouldn't hear from them for three years, this individual was not informed by their GP or CPFT about the Right to Choose.

Qualitative feedback from people diagnosed with ADHD:

'I can't afford to get a private assessment as I can't afford the prescription charges afterwards'

'I have been waiting for over two years to get medication. I was told by my GP that I need to see a psychiatrist'

'I was told by CPFT not to expect to hear from them for around three years'

People have also struggled accessing the **FRS 111 mental health option**.

Qualitative feedback from people phoning FRS 111 Mental health option:

'I waited for 40 minutes and gave up'

'No-one answered. What is the point of having the number if no-one answers?'

'I was told that the issue sounded like a housing issue which was not an FRS issue, despite me explaining twice that it was a mental health challenge' (This individual ended up in hospital after not receiving any help for their MH from FRS and was unable to get a GP appointment)

Other regular long standing unresolved thematic issues unchanged from Q2, and Q3 are:

- Older people – mental health support is disjointed and focuses mainly on Dementia/Alzheimers – not enough focus on depression, anxiety, personality disorder etc
- Older people – Discharge from hospital to home/care home not well supported – unrealistic expectations of carers both in terms of finances and capability
- Older people – still huge barriers to access including digital exclusion, lack of GP appointments, use of language that doesn't cause fear or concern, a 'stiff upper lip' attitude and a collective sense of them no longer mattering to society
- People with PTSD or Complex trauma cannot find support
- People with co-occurring conditions (dual diagnosis) are still not finding joined up support with substance misuse and mental health services
- More people are feeling that they system does not yield to personalise care. The person has to fit the system
- People do not know what mental health support is available to them locally other than GP
- People are struggling to get a GP appointment



- Not knowing what support is out there for when you have been discharged from a service – feeling like you have been dropped – CPFT not referring to other local services
- CPFT staff knowledge of other services or referral to other services not good
- Waiting lists are long and people are not sure if they are even still on a waiting list or not as they are not hearing anything – these times have increased with no proactive ‘waiting list management’ that could support people to access other help sooner
- ADHD and Autism assessment service waiting lists are approximately 2 to 3 years
- People phoning FRS 111 and the service sending the police round to their house
- People phoning FRS are waiting so long for the phone to be answered that they are giving up
- People feeling patronised by their conversations with FRS staff
- People who do get the support they need at the time they need it are happy with the support
- Lots of positive praise for CGL and CRS (Cambridge Recovery Service)

Meaningful Engagement:

Meaningful engagement will be defined by any involvement opportunity that includes service users in a more involved way than offering feedback on their experiences. For example, peer assessing, sitting on tender or interview panels, attending meetings, writing blogs, co-production work or telling their stories. This list is not exhaustive.

In Quarter 4 the team provided a total of 60 opportunities (which were carried out by 32 people) to participate in meaningful engagement.

These include: (some unchanged from Q3 2023)

- The SUN Network involvement forum
- Co-producing a letter around MH awareness for local councillors
- Participation and representation in meetings*
- Delivering co-production training
- Participating in the countywide mortality review
- Sharing story with police cadets for training
- Sharing their own story at various public events
- Countywide Drugs and Alcohol Delivery Board
- Meeting around how to improve drug alerts for people with lived experience
- The ADHD redesign pathway
- Older People’s Mental Health Board



- Countywide Harm Reduction group

*Meetings include Collaboration and Co-production Group, Integrated Neighbourhood Teams, CPSL Mind Good Life Board, Personalised Care meetings.

Teamwork:

The SUN Network staff are meeting regularly to share our workstreams and to focus on how best to evidence the impact of our work. We are supporting each other and crossing over on projects to ensure that we work together. We have regular meetings to share our work and are in the office at least one day a week to catch up face to face. We are aware that our team is growing and changing this year and we look forward to welcoming new colleagues.

Focus for 2025

Co-production – ensuring that there are opportunities available within the ICS system for the people on the forum. Lack of opportunities has been raised as an issue at the co-production collaborative and at the Mental Health, Learning Disabilities and Autism Accountable Business Unit (MHLDA ABU) There have been improvements, however we will monitor this and report to the commissioners.

Reaching out to underserved communities to hear their experiences as outlined in Goal one of the SUN Network's 2022-2025 strategy. We plan to do this through community volunteers gathering feedback from underserved communities that they are already a member of.

Embedding the co-production co-ordinator's role within The SUN Network.

Inpatient Culture of Care work.

Drug and Alcohol co-production facilitator across Peterborough.