CONNECTED

Winter 2018

Forever learning
Listen, learn, change

Keith Oliver
Transatlantic learnings

Preventing suicide
Working together

Repairing harm
With restorative justice

Kent and Medway
NHS and Social Care Partnership Trust
Change is important and we can only change by continually learning how to improve. In this issue we look at how we are learning from those with lived experience as we touch on the exceptional peer support worker role on page 22. Three women are now using their lived experience to help others during their time on Rosewood ward, our new Mother and Baby Unit in Dartford.

We have also spoken to the inspirational Ben West who, following the death of his brother, has created the #Walktotalk campaign which has already reached the heights of Downing Street.

Across the trust we are starting to embed continual change with our campaign Inspiring Change. You can find out more about our first steps on page 7. Why not get involved yourself?

We want to learn from your feedback, what do you like about Connected, what would like to see more of? Let us know.

Contact us by email: kmpt.communications@nhs.net

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The Samaritans are open 24 hours a day, seven days a week and provide confidential, non-judgemental emotional support.

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Learning never exhausts the mind and since I joined the trust in Autumn 2016 I’ve learned a lot from colleagues, patients, carers and others with lived experience.

Learning by doing is a key part of our trust’s values which include respect, working together and excellence. Learning from doing will help us to transform and there are already examples of services such as our Rosewood Mother and Baby Unit (MBU) and Kent Recovery and Wellbeing College that are embedding learning and co-production in very powerful ways.

These are exciting times for mental health services to achieve real parity of esteem with physical health. The 10 year long term NHS plan outlined by Simon Stevens, Chief Executive, NHS England, highlights both opportunities and a range of challenges affecting mental health. Robust learning will play a key role in helping trusts like KMPT to make the most of all opportunities.

A significant opportunity is the peer support workforce, concept of recovery and importance of utilising lived experience. Our Connected feature highlights the care, learnings and support that peer support workers are already providing across the trust to support recovery. Learning from others who have lived experience provides a truly unique perspective and a richness that supports service improvements.

There are opportunities too for addiction services which may extend to recognise people affected by addictions to gambling. According to the Gambling Commission more than two million people in the UK are either problem gamblers or at risk of addiction. Problem gamblers are more likely than others to develop stress-related disorders, to develop a substance misuse problem and to experience depression.

Like other areas of the NHS we face real challenges around recruitment and retention of staff. We also need to think carefully about children and young people and their transition through services to make sure we deliver excellent joined up care.

It’s vital that we now share learning more rapidly across KMPT to develop ideas and use existing expertise to shape service development. Every member of staff and our volunteers can and should have an impact on improving patient care and experience.

As a large trust with around 3,400 staff we face some logistical and cultural challenges disseminating learnings across our teams. There are positive opportunities to work together on this, speed up learning and embed a philosophy of continuous improvement and focus on quality.

I look forward to building on our work around participation and involvement, sharing my knowledge and experience of developing health and care services and working alongside mental health supporters from our diverse local communities to ensure we learn together and create the best possible mental health services across Kent and Medway.

Vincent Badu
Executive Director
Partnerships and Strategy / Deputy Chief Executive
TRANSLANTIC LEARNINGS
ABOUT DEMENTIA

Learning can take place in any village, town, city or country and sometimes staff and volunteers have the opportunity to share learnings on a global platform.

In July 2018 Keith Oliver, KMPT Dementia Service User Envoy and Alzheimer’s Society Ambassador (supported by his wife Rosemary) travelled to Chicago to deliver a key presentation at the Alzheimer’s Disease International Conference (ADI). The conference attracted delegates from over 65 countries including people with dementia, researchers, professional carers, clinicians as well as staff and volunteers of Alzheimer associations.

The number of people in the UK with dementia is set to rise to over one million by 2025. Globally the number of people living with dementia is estimated at 47 million and is projected to increase to 75 million by 2030. In the UK high profile celebrities, such as EastEnders star Barbara Windsor, are raising awareness of dementia and its profound effect on families’ lives.

Keith’s world changed when he was diagnosed with early onset dementia, also known as Alzheimer’s, at the age of 55. As the founder of KMPT’s Dementia Envoy network, Keith has overseen its growth alongside his busy voluntary role supporting the Alzheimer’s Society charity.

Speaking to 750 people at the conference, Keith shared the power of the UK’s new ‘Dementia Statements’ which reflect the things people with dementia have said are essential to their quality of life.

At every opportunity Keith speaks with passion and determination to protect the rights of all those affected by dementia including patients, their families and friends.

“My visit to Chicago was my first trip to America so that in itself was a positive, personal learning experience. This trip taught me that with the right support, travel abroad is both possible and enjoyable. Whilst travel is becoming much harder for me, I am now looking forward to my eighth visit to Australia since my diagnosis.

“My motivation for speaking at the ADI was to share learnings from the UK’s Dementia Statements which are co-produced by people affected by dementia as well as professionals across all sectors including public, primary care and the third sector. These five statements are a rallying call to improve the lives of people with dementia and to recognise that they shouldn’t be treated differently because of their diagnosis. The conference was a great way for countries to learn from one another and help create a global dementia action plan.

“Speaking at the conference was a very proud moment for me and I was able to share learnings about rights, co-production, Dementia Statements, dementia care research and the ‘Improving the experience of Dementia and Enhancing Active Life’ (IDEAL) research project.

“I learned a lot by listening to other presentations at the conference, for example the work in the Far East to create dementia friendly environments and communities. One in five elderly Japanese are predicted to have dementia by 2025 and there is some fascinating work undertaken by entire communities to improve the lives of older citizens.”

Keith is now preparing to continue sharing key learnings at the 13th UK Dementia Congress in November 2018. He will speak to delegates as part of The Tom Kitwood Memorial Address forming the plenary session, ‘dementia re-considered, revisited; the person still comes first.’

Affectionately sometimes called the ‘Old Ocean’s Bauble,’ Brighton is the location for Congress organised by The Journal of Dementia Care in partnership with the Alzheimer’s Society and the University of Worcester. He won’t be jumping on a plane for this conference but the learnings will be equally as important.

As a former primary school head teacher in Blean near Canterbury, learning was at the heart of Keith’s career for many years. His diagnosis hasn’t changed that, it’s just changed direction. Now his students are both professionals and those affected by dementia – here in Kent and across our oceans.
Keith Oliver preparing for his travels
Change is something we need to do to ensure we deliver excellent patient care. We recognise change creates uncertainty and this can be difficult. Change is about Quality Improvement with each little step making a positive difference and helping us to deliver brilliant care through brilliant people. Here, at KMPT, we are making positive steps to embed a vision of continuous improvement with our new Inspiring Change initiative.

Of course this isn’t anything new; we continually review our services. Just take a look at Open Dialogue (P18). It’s a fabulous initiative and we’re delighted to be part of the pilot. We also have our research team (P20) who take part in studies to try to improve regional and national services.

It doesn’t mean that the service people receive will continually change; it means we are continually looking to improve our services. Change will impact on different parts of the business at different times. We will involve staff, patients, carers and volunteers in redesign and change so we ensure we get it right. With our new KMPT care pathway programme, we’ll be working with all our staff, patients, carers and volunteers to continually improve our services.

Let’s take a look at one of our Inspiring Change initiatives, our Clinical Care Pathways Programme which was launched earlier this year. The aim of the programme is to improve experience and quality of care we provide using all the tools we have at hand to do so. This may mean improving our use of technology as well as encouraging new ways of working.

The three underlying principles are:

- Right pathways
- Right practice
- Right place.

But of course there’s more to the detail than that. We know the quality of care people are receiving needs to be consistently reviewed and developed. People with lived experience and staff providing the services have the ideas and the inspiration to know what improvement to this care looks like.

In the next 12 months the Clinical care pathway programme is focusing on improving community and urgent care pathways. The programmes have a number of different pathway groups reviewing what improved looks like, what is needed to deliver an improved service and what do staff and people with lived experience think will make a difference.

It’s early days of course; the pathway teams in place to develop the work are within the Community Recovery Care Group, Community Mental Health teams (CMHT) and the Acute Care Group and they are beginning to challenge the current ways of working and test new ideas. The teams consist of staff, carers, service users, commissioners and other health professionals, who are working together to ensure we develop coherent, consistent, affordable clinical pathways that provide people using services clarity of what they can expect from KMPT. We need to ensure staff feel confident in consistently delivering high quality clinical interventions despite increased demand. Our next steps will be to start piloting the pathways, learning what works and what needs revising; the testing of the personality disorder pathway has already begun in Medway CMHT. As the work develops we will begin to roll out the pathways across the service areas it is relevant to and we’ll keep you in the loop on our progress. Of course, you could always get involved yourself? Why not contact us if you’re interested in helping us make a change?

If you are interested in being part of the development work contact kmpt.communications@nhs.net. Alternatively, join us at one of our carers or patients consultative committee meetings. We’ll ensure you get an update on this programme as well as any other work across the trust. Join us to help inspire change, join us to help make a difference.

www.kmpt.nhs.uk/Getinvolved

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Our clinical care pathway projects
A mental health ward isn’t the most obvious theatre setting but a simple play staged at the trust’s Greenacres site had such a dramatic impact on one patient, it encouraged him to take steps to repair a damaged relationship with his family.

Staff from the trust’s low secure centre in Dartford wrote and performed a play about restorative justice for patients. Acting out the roles of the harmer and the harmed, staff (including Olanrewaju (Ola) Ibitoye, a forensic social worker) wanted to increase awareness and understanding of restorative justice in the most engaging and interactive way possible.

Restorative justice (RJ) is commonly known in the criminal justice system and brings together those who have been harmed and those who harmed them, in a controlled environment to talk about the damage caused. RJ has been found to be widely beneficial to all those involved and the initiative is now being used successfully within the trust’s low and medium-secure forensic services.

The initiative was originally introduced to repair relationships where harm had taken place on the wards, whether between patients or staff and patients. Restorative work is now developing further to help tackle harm experienced between patients and their families.

Ola saw the play’s therapeutic benefits first-hand: “A little entertainment is always popular with patients and this play in particular quickly sparked a lot of conversations including one with *Max.

“Max and his parents’ relationship had deteriorated after he had committed his offence. There were often long periods without any family contact at all. After seeing the play, Max made the decision to send a letter to his parents. This was a huge step for him as he knew it would be an emotional challenge but this was carefully supported with a weekly psychology intervention. Max used this opportunity to address the harm caused to his family through his offending behaviour. It was powerful, thoughtful and emotional.”

Max was supported throughout the RJ process by Ola and Grace a trainee forensic psychologist. Max commented: "The emotional process of writing the letter was challenging and I really didn’t know how my parents would react when they received it. I regularly worked on the letter and support from staff really helped me to articulate all my thoughts on paper."

“All the work that I put into the letter was worth it when I knew that not only had my family read it but that their attitude towards me had really shifted. This one simple act had broken down these barriers between us. I also know that my family have read the letter more than once which means such a lot.”

Sarah Cooper, trainee forensic psychologist, leads the trust’s restorative justice initiative in partnership with Andy Inett, consultant forensic psychologist.

Sarah talks about how adaptable RJ is: “There are many forms that RJ can take and it doesn’t just have to be a meeting between the harmer and the harmed. RJ has been found to empower the harmed by giving them a voice, providing a safe space to tell the harmer the real impact of their act and to get answers to their questions. For the harmer they are able to reflect and learn about the true impact of the harm caused and find a way to repair that.”

“*This one simple act had broken down these barriers between us. I also know that my family have read the letter more than once which means such a lot.”

A number of staff have completed approved RJ facilitator training and others have been trained as RJ champions and are promoting the initiative across the trust.

The initiative is another way that the trust is helping to support staff who can request a restorative intervention if they have been harmed by patients at work. All referrals for restorative practice are carefully assessed and the safety of all participants is key.

* Names have been changed
Those who have used the initiative say they have found it cathartic to be able to talk about incidents and that patients have a better understanding of how things can affect staff.

All staff and patients can make referrals and by becoming a champion, staff educate one another and promote the initiative across wards.

RJ is also improving the lives of staff affected by verbal or physical aggression at work. Andrew Sharp, a healthcare assistant at the Allington Centre is heavily involved with restorative justice at the trust after taking part in the process himself following an incident with a patient on a ward which left him feeling scared and vulnerable.

“I went through RJ after a verbal altercation with a patient who was blocking my way by shouting and swearing. I come from a prison background so I’ve always felt reasonably tough and able to cope with challenging situations and it was a big step for me to start the restorative justice process. RJ is such a powerful intervention and it helped to have protected time to reflect on the incident and everything that surrounded it. You’ve got to do RJ right and open up about your emotions. That’s the hard bit. Admitting an incident made you scared.”

Andrew was so engaged and passionate about restorative justice that he made the jump from receiving to delivering interventions. With support from Simon Cook, service manager, he has been supported with training and is now studying privately to be a Level 5 accredited RJ facilitator. Andrew is one of a number of RJ facilitators who meet up once a month to discuss cases and support one another, across the trust.

“You’ve got to do RJ right and open up about your emotions. That’s the hard bit. Admitting an incident made you scared.”

Alongside his KMPT role Andrew also uses his skills as RJ facilitator in his voluntary RJ role for Kent Police and has witnessed some powerful interactions.

“I really enjoy my role as RJ facilitator and I’ve been able to grow personally and professionally through restorative justice. We’ve only just scratched the surface of RJ and what it can do so I’m excited for the future of restorative justice at KMPT.”

The trust has applied for the Restorative Justice Council’s restorative service quality mark (RSQM) and this external recognition would make KMPT the first NHS trust to hold this accreditation.

As the trust continues to learn from RJ, with more thought many more restorative letters may be written articulating a range of emotions into words.

Max keeps a copy of the letter he wrote to his family which is a reminder of both his feelings and journey that he has taken towards repairing his family relationships.

Max added: “Watching the play that day was a bit like having a light switched on in my head and I’m so glad that I made the decision to take part in restorative justice. I was able to reconnect with my family through the power of words and I also learned a lot about myself.”

The restorative power of letter writing can play a key role in repairing damaged relationships. Restorative justice may not be right for everyone, but when applied safely and in the right way, it can help to change lives.

RJ is guided by six key principles of restoration:
• voluntarism
• neutrality
• safety
• accessibility
• respect


The practice can involve both a proactive approach to preventing harm and conflict and activities that repair harm where conflicts have already arisen.
Earlier this year, NHS England and Public Health England announced £667,000 of new funding for suicide prevention across Kent and Medway. The funding marks the start of a three year programme worth £25 million that will reach the whole country by 2021. Here in Kent and Medway, the Sustainability and Transformation Partnership is working together to fund projects which will benefit our communities.

Find out how we’re doing...

First let’s look at the facts - every single death is a tragedy for the friends and family of the person who died as well as the whole community. According to the Office for National Statistics, there were 5,821 suicides in the UK in 2017. Men accounted for three-quarters of those suicides (4,382). One third of those who took their life in Kent were known to secondary mental health services, one third known to primary care and one third had not accessed services prior to their death at all.

It is because of these statistics that the government has committed to reduce England’s overall suicide rate by 10 per cent by 2021 and supports the zero suicide ambition for mental health inpatients announced earlier this year.

Across the county, the Release the Pressure campaign has been working hard to target those at most risk. Research shows that men are less likely to ask for help from friends, family or mental health services, so in 2016 the campaign (including a 24-hour free support-line) was launched to encourage men to speak to someone. The highly visible campaign grew from strength to strength and has since extended to providing training to organisations and voluntary sector groups to improve the support available for people when they are going through rough patches in their lives.

It’s good news that the number of suicides across Kent and Medway fell slightly in 2017 to 141 (from 167 in 2016), but work still needs to continue. Thanks to this new funding, the campaign will be able to continue its messaging and support line which receives approximately 2,000 calls a month. Education will also continue with suicide prevention training targeting employers, particularly in high risk industries such as construction, agriculture and transport.

Tim Woodhouse, lead
for Release the Pressure will be attending as many conferences, events and workplaces as he can to help employers create environments where staff are supported with their mental health.

In August 2018 a countywide workshop was held in Maidstone to discuss the impact that losing someone to suicide has on bereaved families and crucially whether there is more that can be done to support them. Over 40 stakeholders attended which included NHS providers, local authorities, GPs and importantly bereaved families themselves. Actions from the workshop have been taken and will be worked on as part of the project.

Within KMPT, we have identified parts of the service which will have action plans put in place where evidence shows certain interventions can make a difference. This will include partnering with other organisations, in particular the Samaritans and other primary care and NHS providers who will work together to put additional support in place for service users upon discharge, providing additional follow-up support for those who attend A&E and who may benefit from more intensive support and finally, making sure all our staff have suicide awareness prevention training.

Let’s not forget young people either. With 25 per cent of young people feeling suicidal at least once in their lives we need to ensure we are doing all we can to help people from an early age. This will of course include working with North East London Foundation Trust (providers of children’s mental health services in Kent and Medway) to look at the many ways to promote suicide prevention and awareness to young people. Under the banner of the existing campaign Suicide Safer Universities, we’ll be working with Canterbury Christ Church University, University of Creative Arts, Canterbury College and University of Kent to benefit from their existing systems, skills, knowledge and expertise to develop prevention, intervention and postintervention policies and practices. This will cover a combined population of 50,000 students and 6,000 staff.

“So much had gone wrong in my life, talking helped me to start to take control and put things right.”

Joe, 34, from Kent*
The project has already commissioned suicide awareness training for university/college staff in addition to developing clear pathways available for those feeling suicidal. It’s not just within the schools and universities that this project has shared their knowledge. The team have worked with the local night economy to support and train staff who come into contact with vulnerable students. With closer links, it is hoped there will be greater prevention.

But of course, it’s not all about what we already know. There are also opportunities available for us to learn more to help improve services. By undertaking qualitative research, it is hoped that we will be able to look at the behaviours of those men not known to secondary mental health services in the 12 months prior to attempting suicide or those who took their lives, by working with the coroner’s office. Naturally work can then develop to further the preventative work needed.

Lastly £82,000 of the overall funding will be distributed directly to local community projects designed to prevent suicide and reduce self-harm. Announced on World Suicide Prevention Day, invitations for bids were welcomed to help support big and little ideas. A fantastic 62 bids were received and considered by a panel from the Suicide Prevention Steering Group. The 25 successful bids will be announced at a special event in December.

Project lead Tim Woodhouse said: “It’s clear that the topic touches all parts of society and we have chosen a range of bids which will support individuals across Kent and Medway as well as providing evidence of what works and what could be replicated in other parts of the county.”

Professor Catherine Kinane, KMPT’s Executive Medical Director and STP lead for mental health said: “Our focus on suicide prevention in Kent and Medway has redoubled our efforts to prevent suicide and thereby all its tragic consequences for loved ones. Working together we are working to ensure those who feel suicidal are aware of support available.”

We’re working hard to prevent suicide, to encourage people to talk and to help those bereaved by suicide. One day we hope not to have to run these projects but all the time we’re needed, we’ll be there. Why not join us?

Want to get involved in suicide prevention work across Kent and Medway? Contact kmpt.pmo@nhs.net

The Release the Pressure campaign urges people to seek help by calling Freephone 0800 107 0160 where support is available from trained and experienced staff 24 hours a day, 365 days a year. The campaign website www.releasethepressure.uk also includes case studies from men in Kent who have turned their lives around after attempting suicide.

You can also call the Samaritans on 116 123. To arrange a face-to-face conversation, email jo@samaritans.org or visit www.samaritans.org.
Losing someone you love is heart-breaking and can affect all areas of your life, both personally and professionally. To go through such deep personal loss and create something positive from it, which will help others affected by mental ill health, takes real courage.

That’s exactly what one young man has done.

Chances are you may have heard of Ben West. This amazing 18 year old organised a 200km walk across Kent while studying for his A’Levels to raise awareness of mental ill health. He did all this while grieving for his 15 year old brother Sam who took his life earlier this year.

As you would expect, this tragic event crushed Sam’s family and friends. None more so than big brother Ben. No one can imagine the impact something like that has, unless you’ve experienced it yourself.

Ben, his family and friends want to help prevent anyone from having to go through that experience. He knows it will take some time, but together with Mum Michelle, Dad Chris and brother Tom, they’re determined to use their experience to make a difference.

Project #Walktotalk all started on a train journey when Ben had his very own light bulb moment. Grabbing his phone he quickly set about rallying the troops – ‘how about raising awareness by walking across Kent?’ Eleven close friends quickly jumped on board and the 200km walk across Kent was created.

Ben admits it wasn’t easy. “Organising the event wasn’t straightforward. I’d been involved in charity events before but never organised anything!”

Thankfully he wasn’t alone and friends and family started to throw in ideas which saw the project grow to more than 450 people taking part in stages of the walk across ten days.

Studying and organising the event whilst still grieving for his brother was tough. With everything going on, it was hard to ignore that it had the potential to take its toll. “Revising was difficult, it was hard to focus and naturally affected how well I could revise. However I soon found that organising the walk helped me to clear my mind and focus better. It gave me a little bit of an escape. From the beginning I knew that the walk was something positive I could do to focus my attention. It kept me in a much better place.”

The project soon became so big that more and more of his friends pitched in. “None of us had any experience doing this sort of thing, it’s been a complete step in the dark for all of us, but we’ll take all that experience and put it to making an even better event next year.”

The walk ended in London outside the Houses of Parliament and the team have been praised by celebrities, MPs and none other than the Prime Minister. “Receiving that letter from Theresa May meant so much, it was the recognition...
that we’re really starting to make a difference. All the messages of support have shown us that we’ve found something here, it’s really helping people and we have to keep it going.”

With the 2018 walk completed, there’s no sign that team West will be stopping anytime soon. Mum Michelle is giving speeches at conferences to encourage teachers to take part in Mental Health First Aider training and the team have raised over £15,000, from the #Walktotalk event, to help develop more mental health awareness projects.

In 2019, they are already working on another walk at Easter and if that’s not enough, there’ll be another event in the summer. But you don’t have to live in Kent to take part. “We’re putting together plans to help people run their own events under the #Walktotalk banner. We’ve had so many positive messages and comments about the project, it’s important to us to expand on what we’ve already achieved. We’ve learned from what we’ve done so far and now others can take that and build on it themselves. Together we’ll keep learning, keep raising awareness.”

There’s no doubt that the first event outside of Kent is likely to be in Liverpool where Ben is now attending the University of Liverpool while studying Aerospace Engineering. “Jonny Benjamin, MBE, a mental health campaigner, put me in touch with some mental health champions in Liverpool. I’m meeting with them so we can bounce ideas of each other to see how we can work together, including an awareness event. I’m also in touch with the University leadership to find out more about a project they are doing to increase the awareness of student support. Naturally I’d like to hold a #Walktotalk event in Liverpool next year!”

Knowing full well that education is the key to arming people with advice on mental ill health prevention and messages of where to get help, team West are currently encouraging everyone to sign a ‘Save Our Students’ petition calling for mental health first aid training to become compulsory for teachers. “The Department for Education is encouraging schools to have mental health first aiders but unfortunately many schools are happy with just one but it’s not enough for the amount of students they have. We must not stop until every teacher has the training. You don’t need the school to put you forward and many charities are subsiding costs. Anyone can take part and it all goes towards making sure someone is there for those in need.”

With more than 178,000 signatures, there’s still room for more. www.samwestfoundation.org

For team West, their personal devastation has inspired them to make a difference. Don’t wait, join the team.

@teamwalk2talk
“This is why I came into this work - to be this way.”

Service lead for Open Dialogue Yasmin Ishaq smiles warmly, recalling comments from her team about the pilot project they are involved in.

This is the same team that came back to the office in November from a glittering Royal College of Psychiatrists ceremony in London with a beautifully-engraved crystal trophy to display after proudly scooping joint ‘working age adults’ team of the year prize.

Open Dialogue has been a game changer for staff morale with a shift away from a role as solely treatment practitioners toward more relational therapeutic beings. That makes them happy. And the 150-200 clients who have so far been engaged in the process are feeling able to start thinking more about what has happened and how they can now move forward. That is what matters most and for whom they are collecting the award.

Industry recognition and praise indeed after a bold move last year by KMPT who decided this pioneering approach was worth exploring, made the investment and became the first in England to go live with a service.

Since 1 February 2017, service users have been able to decide what is important for them in an empowered way which has supported the route to recovery once they are in possession of all the tools they need to achieve their goals.

Yasmin said: “Often we hear them say they don’t think they need to see us anymore, that they will be OK on their own. That it’s time to leave. For us, that is a compliment.”

“It strips everything back and puts it in the context of that person’s life.”

So now a large-scale research Open Dialogue trial starts proper, funded by the National Institute for Health Research (NIHR). Evaluation will take place within a small cohort of trusts stretching from Canterbury to inner-city London and down to Devon, offering a varied demographic and set of social challenges. Dr James Osbourne, Consultant Psychologist and Clinical Lead for Open Dialogue said: “It is very exciting for KMPT to be a lead site in a major Randomised Control Trial (RCT), the gold standard measure of research. This is the first RCT into Open Dialogue in the world and as such draws close attention to see not only if the model is an effective treatment but also whether the delivery of the model can be scaled up to be offered across the NHS.”

In KMPT, eight clusters of GPs have been selected in the Canterbury and Coastal area with four randomly assigned to receive Open Dialogue and four to receive the current mental health treatment model.

The collection of data and subsequent analysis of outcomes will take time. Those with a heart for Open Dialogue are expecting to see less bed days, less use of medication, positive feedback on service user, family/network and staff surveys, reduced staff sickness and discharges from the service with no return as people embrace self-care and wellbeing, start or return to work or study and engage in a purposeful life.

It all began when the trust started looking at the concept first developed in Finland 30 years ago. That is the same Finland that this year was named the happiest country in the world in which to live.

Practitioners in remote Tornio, western Lapland, in the 1980s recognised the upsetting levels of psychosis and schizophrenia in the 60,000 indigenous inhabitants. They thought there must be another way to support those struggling with their mental health other than medication and hospitalisation alone. They were right and the new treatment model was born.

The team based at St Martin’s in Canterbury are co-applicants for the trial with an adaptation to the original model making it a Peer-supported service (POD). This means ‘experts by experience’ are also part of the team; peer support workers who are able to offer a legitimate understanding of the challenges people who find themselves in similar crisis situations are facing and therefore have an authentic insight and mutual understanding.

Once someone is referred to the team, there can be a rapid response, if required, within 24 hours. A meeting will be held in the person’s home or wherever they feel comfortable and those attending will include the service user, their support network/family and the mental health practitioners.
Everyone in the room then listens to one another and has an input in the decision-making before agreement is reached collectively on ways forward. And it will be that same group throughout the process with as many meetings as are needed. Relationships are central to the approach and trust develops in the process.

Yasmin continued: “It all starts with a question. What has happened? Not what is wrong with you, not what are your symptoms. What has happened? What is causing you the distress? It strips everything back and puts it in the context of that person’s life. All treatment decisions follow an understanding of what has happened and what may be helpful going forward.

“This is not an intervention. This is a collaborative process with compassion at its core. Ideas are offered tentatively. There are no absolutes from the practitioners or professionals. Our knowledge comes in when it proves helpful, but the primary goal is generating the dialogue.”

As the name suggests, this is about talking and listening. Clients feel heard and validated. Anecdotally, these meetings are powerful moments of reflection where thoughts and feelings are often aired and shared for the first time. It is does not exclude any treatment that may be helpful but does not impose an intervention from an expert stance.

What helps is that continuity of personnel so there is no need to keep repeating the story. What helps is the change to active listening and understanding, rather than broad-brush diagnoses of an illness; acknowledging the feelings, emotions and reasons and making plans in light of those to change and move onwards. What helps is the safe space where loved ones and others, who will have often tried everything they can, to also feel supported.

It often strengthens the network, it encourages resilience and an aptitude to deal. It recognises mental health as a very personal journey. It offers choices and control of a process.

Only time and satisfied service users, families and networks will tell whether the initially-intensive resources required will, in the long term, prove its worth.
Introducing Emma Bowler - Lead nurse, Forensic and Specialist Care Group and now a trained PI. No she’s not on a stakeout, doesn’t wear a trench coat and hat or walk around complete with spy glass. She is however following up on investigative leads but she doesn’t work alone. Emma tells us more about her role as a Principal Investigator (PI), working with the research team and how research can make a difference to national healthcare.

“I had been attending the trustwide Smoke Free Forum when I was approached by the research team who asked if I would be interested in becoming a PI. My initial thought was ‘how much commitment will this take?’ The team assured me that my involvement would be to oversee the research and with full support, any paperwork behind it. I’m most certainly a people person, give me face to face, some practice to carry out, active discussions and I’m happy. Give me paperwork and statistics and it’s really not my thing. So, with the support of my line manager, I signed up to a day’s face to face training. It really started to open my eyes and remind me of the importance of research. I met a real mix of people including research teams, clinicians and administrators. Just one day later, I started work with the research team as the PI for the Smoke Free project.

“The research was carried out with the University of York and was a national project. My role involved helping encourage people to join the project, sharing news about the research programme at trustwide meetings and carrying out the odd bit of paperwork. The research team however took on board the shaping of the project, worked closely with patients, families and healthcare professionals. They collated all the data and submitted our results to the University of York. We were then invited to attend a conference in York where they presented the results. We also heard from patients who had some fantastic results from the programme. It was an amazing day to conclude a project which may go on to change someone’s life.”

Although Emma is keen to continue her role as a Principal Investigator alongside her role as lead nurse, she knows that it wouldn’t be possible without the dedicated KMPT research team at her side.

“The research team hold regular engagement events to encourage staff to bring their ideas to them. Many of those that carry out the day to day care have some great ideas on how to improve things. We just need to be able to hear them. When studying as a student nurse we have to carry out a piece of research to complete our degree. What happens to that research? So many of us just get on with our day to day work once we qualify and that study gets forgotten. Here at KMPT we are encouraging all newly qualified nurses to share their research with us. If you’ve done some incredible research, we want to hear about it.”

Join us in shaping future healthcare. Find out more about the research team and the opportunities available by contacting kmpt.research@nhs.net.
“You’re trouble shooting, offering a clinical perspective and overseeing the project. You’re not carrying out the interventions, which is the biggest part of the research. The research team or other clinicians do all that but you still play an important role in a fantastic piece of work.”

Hannah from KMPT’s Research team and Emma Bowler, lead nurse and PI
Most of us take our home for granted but for those sleeping rough, a home can seem completely beyond reach. Launched on World Mental Health Day a project in Thanet is working hard to get people off the streets with the support and help that they need.

RISE – Rough sleeper Intervention, Support and Empowerment is a partnership between Porchlight, Thanet District Council, KMPT and the Forward Trust. The team includes people who have considerable experience of working with the homeless so they really understand the needs and possible barriers to support.

KMPT’s Amanda Lailey has been seconded to the team to provide mental health support. “In September earlier this year, councils across England were given allocations of a £34 million fund to provide local support for those living on the streets. The funding will be spread over two years so we have a short space of time to try to make a real difference.”

Thanet was allocated £367,000 to fund a rough sleeping coordinator, mental health specialist outreach worker and substance misuse worker. It’s a truly holistic approach.

Amanda has worked alongside Thanet District Council for some time but also has a personal passion for helping the homeless. She added: “I’ve previously volunteered with the winter shelter and could see the evidence myself that having a mental health nurse on board works. I’m now seconded to the RISE team and can work full time on helping those who really need it.”

In order to reach people at the right time, the team’s shifts need to be really flexible. Amanda continued: “It’s difficult to work a 9-5, Monday-Friday shift when those you need to speak to get up early in the morning to go about their daily routine and don’t return until late at night. We’re also looking at our weekend resilience. We have to be flexible to ensure we’re reaching those that need us. It’s most certainly not a 9-5 job.”

The team will work with rough sleepers to develop a holistic support plan. This will include helping them to tackle any underlying issues which are preventing them from finding permanent housing. Amanda added: “There are always a range of reasons someone is homeless. Poor physical health, mental health problems, alcohol or drug issues, bereavement or experience of the criminal justice system. Of course poverty, housing supply and affordability make things more difficult. It’s important we work closely as a team to help the person. I’m there to help their mental health needs and just that little support can make a real difference. The housing team are also on hand to help people secure their own accommodation. It can be a real life changing moment once they’ve made that step and realise there is someone there to help.”

In August this year, the Communities Secretary announced the government’s ambition to halve rough sleeping on England’s streets by 2022 and end it altogether by 2027.

In 2017, 46 people were reported as sleeping rough in Thanet. That’s more than doubled from 2014. But the team are already making an impact, they’ve helped five people into supported accommodation and a further eight people are now in full time accommodation.

Amanda has a full caseload and sees patients on a regular basis. The relationships they are building during that time are equally important as the mental health support they are providing.

“Being able to see a positive outcome is fantastic, if that person tells others that we can help it’s an added benefit. If they can see for themselves how we’ve helped and supported someone, they are more likely to work with us to develop that support for themselves.”

Speaking at the launch of RISE, Cllr Lesley Game, Cabinet Member for Housing at Thanet District Council, said: “Over recent years, we have seen how social and economic factors have had a critical effect on the housing and homeless situation across the UK, and Thanet is no different. We face many of these challenges in our community, so I am extremely encouraged that we have secured this funding until 2020. It will allow us to extend the work we already do in Thanet and support some of the most vulnerable people in the area.

“Together with the different organisations represented at the launch today, we hope to address the issue of rough sleeping by working together. Thanet RISE enables us to collectively work with, and empower, those who need our assistance the most.”

Amanda continued: “We can see what works quickly and seamlessly. Working in this joined up way works, we all know it but now we have tangible evidence. We hope that this will support the service we provide until it’s no longer needed. I love my job, but I can’t wait for that time to come.”

Want to help? Contact www.thanetwintershelter.org.uk
We live in a world where we can all struggle at times. Finding kinship and learning from someone who has been through a similar experience and come out of the other side can be therapeutic, powerful and inspiring. KMPT Peer Support Workers (PSW) have all been through their own mental health journey. They have experienced the highs and lows of mental ill health and have their individual stories to tell. These are the group of professionals who are delivering care and support across Kent and Medway by being the very example of what can be achieved.

The trust employs around 30 PSWs from a range of backgrounds. They offer social, emotional and practical support. One of our newest PSWs is Jane Wackett from Rochester who supports mums affected by acute perinatal ill health at the Rosewood Mother and Baby Unit (MBU) in Dartford. Lived experience and co-production were at the heart of the MBU’s development so it was no surprise to see three PSWs employed at the unit to offer that important road to recovery example for our patients.

Jane commented: “At a time when patients can find it hardest to get their voice heard, PSWs can bring patients into the conversation without necessarily needing to use words, which is so incredibly powerful. We all want to be understood and PSWs can help that process. The MBU always has a lived experience voice and PSWs are involved at key points such as staff handovers, care planning meetings and reflections.

“As part of my own personal recovery, I was able to access the trust’s therapeutic community (Brenchley Unit) which was such a transformative experience. It was there that I found my voice with the help of group therapy which, as it turns out, was a good training ground for peer support.

“Together PSWs bring a diverse range of skills as well as lived experience. My previous professional background was working with children and families and my current work in research has really helped inform my work. The most important thing though is being able to offer hope and that ‘knowing nod’ which can mean so much to someone when life seems insurmountable.”

The trust has ambitious plans to grow its existing network and treble the number of PSWs with an aim for all trust sites to have at least one PSW by 2024.

Natalie Livesey is the trust’s peer support lead and speaking to Connected it’s clear that she is excited about transformation plans for the team.

“PSWs have had a real impact in so many areas, such as staff training e.g. restraint techniques and learning from them has helped to improve the overall patient experience. They’ve helped the trust to reflect on not just the service.
we provide but the environment that we provide it in. How does it look and feel for patients to enter a building for example and we’ve made positive changes as a result. They have also helped to strengthen carer engagement. PSWs are a vital support for recovery and can help to both reduce quantity and length of readmissions. This is a workforce with an exciting future ahead.”

“PSWs have had a real impact in so many areas.”

Stephen Brett is a PSW within the Early Intervention in Psychosis (EIS) community team based in Maidstone, supporting people aged between 14 and 65. He is involved in assessments of patients and receives referrals via care coordinators. He said: “The effects of psychosis can include paranoia, mistrust and anxiety which can be a barrier to treatment. As someone with lived experience of psychosis I can do a lot to break down these barriers which builds trust with both the person directly affected and their loved ones. I enjoy the variety of the role and the feeling of making a difference which includes practical hands on work with clients to help them re-engage socially or helping them to reconnect with things they used to love doing. I also enjoy spending quality time with clients to really establish what they need support with. I am involved in important conversations with staff and feel really listened to by the team.”

The trust is also recognised nationally as a key employer of peer support workers and in June 2018 the trust hosted the Implementing Recovery through Organisational Change (ImROC) annual conference, ‘Peer Critical Debate – Keeping the plates spinning’. Delegates travelled from as far as Ireland to attend the event held at St Martins Hospital in Canterbury. Natalie and her team worked hard to make the event a success and is rightly proud of its impact: “The conference gave KMPT the opportunity to share our experiences about building and evolving a peer support workforce and I was so proud to share our achievements. We also listened to the amazing work that other organisations are doing with their peers.”

The vital role they hold is recognised by organisations such as NHS England who have committed to growing more peer support workers in all settings as part of the Five Year Forward View and mental health work force plan.

It’s clear that the trust has embraced and learned from peer support workers who add essential skills, empathy and knowledge to its workforce. The future will be one filled of more learning, ‘knowing nods’ and shared skills as KMPT’s PSW workforce continues to grow.
THE RAINBOW OF FAITHS AND CULTURES SHAPING OUR LEARNING

There is nothing more empowering than learning from the mix of staff we have across the trust. With more than 3,500 members of staff, we come in all shapes, sizes, genders, faiths and cultures. As part of the NHS, we value our contribution to one of the largest employers in the UK.

Here at KMPT, we are committed to strengthening diversity, embracing equality and inclusion while treating each and every person with dignity and respect. We celebrated this at our very first diversity conference in October. We were joined by more than 60 members of staff who discussed the trust’s journey so far and celebrated the recent appointment of KMPT’s first ever diversity and inclusion awareness trainer, Yasmin Ralph, who joins us at the end of November.

Sandra Goatley, Director of Workforce and Communications put the event together with her team and is working hard with colleagues including equality and diversity manager, Audrey Quansah-Abakah to create positive and lasting change.

Sandra said: “Our aspiration is to create a diverse and inclusive environment where people can bring their whole selves to work and everyone is recognised for the difference they bring. The conference was so powerful and positive. We know there’s still a lot to do and there are a number of things planned to strengthen diversity, inclusion and reduce bullying and harassment concerns. The future is exciting as we are introducing initiatives including one to attract apprentices with a disability and a campaign to support women in the workplace."

The event featured inspiring talks from Tara Hewitt, leadership and inclusion consultant, who talked about her own experiences in the workplace as a transwoman and LGBTQ (lesbian, gay, bisexual, transgender, queer) issues. Tara’s talk and workshop on trans-inclusion empowerment generated so much of a buzz that the group went on to create our vibrant social media hashtag; #KMPTProudRainbow which you’ll see emblazoned across Facebook, Twitter, Instagram and LinkedIn from now on!

From our own workforce, we were delighted to hear from David Stedman, a chaplain based at St Martin’s Hospital in Canterbury who is responsible for chaplaincy services across Canterbury and Thanet. David spoke about the trust’s new Faith Network designed to provide a forum for staff and volunteers from all faith communities (and none) to share experience and advocate for religious tolerance to help shape corporate and clinical culture. Taking the strapline: ‘Brilliant care through brilliant people’, David developed the concept of brilliance as light and hopes to show how light is a common theme across many religions. “I believe that our faith network will encourage understanding and help challenge religious discrimination. Faith also has therapeutic benefits and can be a valuable part of pastoral and spiritual care, especially at challenging times. There is profound historic wisdom in all major world religions which spreads light and hope.” Commented David.

Simon Cook is service manager for the Forensic and Specialist Care Group in Dartford, chair of the trust wide BME (Black and Minority Ethnic) forum and a Manchester City football supporter. He is also very proud to be part of the Windrush generation. Simon firmly believes the forum has helped to drive greater equality and change at the trust, particularly to help tackle incidents of racist abuse and hate crimes against staff. Simon added: “It’s been a challenging but rewarding time and I’m proud of the forum’s work. We’ve been listened to by the trust and encouraged to innovate, for example we are developing ways of simplifying incident reporting to help others to speak up. There’s still more work to do and I’m looking forward to working more closely with the trust’s disability and LGBTQ forums to share learnings”.

Feedback from the trust’s first ever event has been positive. Changes have already been made and delegates have all committed to their own personal pledges to further that change.

Thanks to the hard work of staff across the trust, we are creating a more diverse and inclusive environment where everyone feels able to bring their whole self to work. The #KMPTProud rainbow of all colours, faiths, genders and backgrounds is destined to shine more brightly than ever.
NEVER TOO LATE TO LEARN

Ask most people what represents a typical apprentice and the response may be the stereotypical bright eyed school leaver learning a trade such as carpentry or plumbing.

Modern apprenticeships have undergone a magnificent transformation. Here at KMPT you’ll find 90 apprentices, including staff in their 50s, all benefiting from an apprenticeship programme which will help them build on their existing skills, enhance their contribution to the trust and undoubtedly help shape the service for our patients.

People aged 25 and over accounted for 46 percent of apprenticeship starts in 2016/17. At KMPT, both existing and new staff have been challenging the stereotype and are benefiting from the varied apprenticeship programme which supports continuing professional development.

Nursing apprenticeships are an exciting new area for the trust and one that Andrew Dickers, Lead Nurse for Education and Development is helping to spearhead. KMPT is a key member of the new west Kent consortium alongside Maidstone and Tunbridge Wells Trust, Kent County Council and Hospice in the Weald which is offering training and development for up to 18 new nursing apprentices in partnership with Canterbury Christchurch University. Following the successful completion of the two year programme these Band 3 apprentices will qualify as registered nurses with the Nursing Medical Council (NMC) and progress to Band 4.

With more than 34 years of mental health nursing under his belt, Andrew is excited and optimistic about nursing apprenticeships and their impact on the next generation of nurses.

“The apprenticeship programme gives nurses a broad picture and experience of nursing with a deeper insight, knowledge and understanding across a range of settings. For example nursing apprentices will develop their understanding of the range of psychiatric conditions that may be presented at A&E. There’s a real drive to create parity of esteem between mental and physical health and our nursing apprenticeship with our acute and palliative care partners will help to achieve this at a local level.”

“We are proof of the pudding that you are really never too old to learn new tricks!”

Non-clinical staff are also benefiting from apprenticeships and standing in front of Laura from Connected are a trio of KMPT staff aged 59 and 60 who are full time porters, based at the Thanet Mental Health Unit for older adults in Margate. They are studying for a NVQ Level 2 in Facilities Management and collectively admit that studying for qualifications is something that they thought was firmly in the past. Kevin Dunkling, William Berrycloth and David Perkins have over 60 years’ KMPT service between
them. Their varied roles include anything from fixing chairs, putting up noticeboards and shelves to painting and decorating.

The team however identified a gap in their skills set, particularly around health and safety, which led to the trio starting their apprenticeship which they do alongside their day jobs. The porters are completing a range of mandatory and optional modules as part of the NVQ including Sustainability and Environmental Issues for Facilities Services, Health and Safety for Facilities Services and Ground Keeping.

An assessor from the provider, Qube Learning, visits the team every six weeks to undertake thorough practical assessments, for example undergoing a test which will check for electrical currents in an area a noticeboard has been put up.

The team are enthusiastic about their late schooling and all recommend the apprenticeship programme which they agree has enhanced their skills and developed their confidence. The assessment has also led to some of the group being given additional support with practical skills such as maths and English. The trio are due to complete the apprenticeship in Spring 2019 and their families were all proud, albeit a little surprised, of their enrolment on the programme.

Fiona Anderson is the trust’s apprentice lead and work experience manager and speaking to her it’s clear that the trust is also learning a lot from its apprentices.

“Apprentices bring their own skills and experience to KMPT. The trust’s first ever graphic design apprentice, Stan Brooks, supports the Communication team designing literature such as patient leaflets and posters and as well as learning new skills from an experienced designer. He has also shared his design expertise with his colleagues. After only a few months in the role Stan was a finalist in the Learning from Listening category at the trust’s annual awards which recognise staff and volunteers.

“Anyone between the ages of 16 to 67 is eligible for an apprenticeship and they are a great way for existing staff to develop new skills while keeping their existing pay and conditions.”

Kevin is proud of what he and his fellow porters have learned from the apprenticeship so far and also highlights the added value that their new skills have brought the trust.

Kevin added: “Through the apprenticeship we have upskilled ourselves and are able to carry out work more confidently and to an even higher standard than previously. As a team we have learned from one another and also from the assessor. We are proof of the pudding that you are really never too old to learn new tricks!”

As the porters talk about new projects it’s clear that the apprenticeship has taught them a lot and there is excitement for the future. As the trust nurtures new and existing talent through its ever expanding range of apprenticeships it’s certain that many more staff like Kevin, William and David will continue to grow.
THANET PILOT TAKES FLIGHT

Pam Wooding, KMPT Recovery lead has been at the forefront of developing Kent’s first Recovery and Wellbeing College. Connected spoke to Pam earlier this year as the team launched their pilot in Thanet alongside partners Adult Education, part of the Community Learning and Skills Group. Here we catch up with Pam and her growing team to find out how the pilot is supporting people with recovery and learning.

“It has been all go since we opened for enrolments in April this year. We worked hard to encourage students to enrol in the courses and haven’t stopped since!”

The courses started in September and more than 60 students have signed up to the college with more than 300 course enrolments.

Courses include wellbeing, building resilience and exploring psychosis among others - and the prospectus continues to grow. The college has 16 facilitators, including clinical, patient experience, psychology, occupational therapy, peer support workers, AHP leadership team and vocational rehabilitation. Some of those who have already had a taster of the courses have also expressed an interest in helping facilitate courses themselves.

“It’s been amazing. The feedback we’ve had has shown us just how wanted the college is. One thing we have really learned is the importance of holding introduction sessions. Volunteers are on hand one day per week for anyone interested in the college courses to talk to. It made such a difference to be able to familiarise themselves with some of the facilitators, fellow students and the location of the courses. We weren’t sure if it was necessary but it broke down some barriers, reduced anxiety and has become a key part of the programme.”

As a pilot it’s a learning curve for everyone. The team have realised that there is more administration work than anticipated and most certainly have been overwhelmed at the role the students play themselves in helping their fellow students’ learning journey as well as supporting them in their mental health journey.

“We’re looking for more partners to come on board. We want to be able to reach more people and the best way to do that is to work with similar agencies. We’re already in discussions and we need to continue those conversations.”

“One particular student springs to mind. She enrolled on the Recovery College (introduction) and Mind and Body programmes. She’s been very open about her personal experiences including previously being in prison, her former drug use and being homeless. She’s also spoken about her journey and the support she’s receiving. During the courses she’s worked hard to be part of the group, been engaging and really absorbed learning as part of her recovery. We’ve all been bowled over by the depth of wisdom being shared in the classroom. It’s making a huge difference.

“It’s been a completely levelling experience – bringing people together who would be unlikely to get together and communicate so honestly outside of a safe, compassionate and structured learning environment.”

The benefits of working so closely with Adult Education were obvious from the beginning. Their experience and recognised skill in providing an excellent learning environment meant the team didn’t have to start from scratch. However the benefits to the students haven’t just stretched to a seamless enrolment process.

“One student desperately wanted to go back to college but had to take an English and maths assessment. Whilst they were attending recovery college courses, they took the opportunity to enrol and are now looking at going back to college full time.”

So the pilot continues, but what is the future for Kent’s first Recovery and Wellbeing College?

“We’re holding our first graduation! On 11th December we will be celebrating all our student’s achievements at the Turner Contemporary. Then it’s next steps.

“We’re looking for more partners to come on board. We want to be able to reach more people and the best way to do that is to work with similar agencies. We’re already in discussions and we need to continue those conversations.”

In the meantime with feedback such as ‘I wish this had been available 20 years ago’ and ‘this course has been a real eye opener to myself, would attend again’ the team are inspired to continue. Watch this space...
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• Respect at all times.
• The right to be and feel safe at all times.
• The right to be treated fairly and learn in a place that is free from discrimination, harassment or bullying.
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• A safe and pleasant learning environment with good facilities and appropriate resources for your course of study.
• Clear and accessible communication with us.
• Full and accurate information about our courses, including any entry requirements, the content and level of the course and what you can expect to learn.
• Clear information on how much you will have to pay, any additional costs you can expect and what financial help you may be entitled to.
• An individual learning plan that will enable you to chart your progress and achievements.
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