



Community Programmes Update

The main features of the programme are as follows:

Minimum Programme

Twice weekly group therapy (Monday 1-2.30 & Wednesday 1-2.30)

Keyworker sessions as required.

3 monthly MDT/Review meetings.

Following discussion with the client and MDT we will recommend the client attending elements of the morning programme and/or modules. This will be discussed on an individual basis, dependant on what is needed.

3 Streams of Treatment

We will have 3 streams of treatment, depending on identified need. All 3 of the streams have an overarching goal to increase psychological flexibility:

Stabilization and Support: Morning Programme: This has a primary focus on stabilization, addressing Goal Setting, Developing creativity, Skills for Wellbeing, and Connections. The content of each morning group will repeat at 6-monthly intervals. Group members will have a keyworker and will have regular check-ins. Currently group members are also clients of the CMHT.

Skills and Understanding: Modules of 4-5 weeks duration (Usually early afternoon), focused on a particular theme, supporting people to have an increased understanding of their struggles and to learn new skills to assist with increasing psychological flexibility. These include 'Living with Anxiety', 'Distress Tolerance', 'Dealing with Depression'.

Change and Growth: This is a longer term twice weekly group programme that can also integrate and develop issues worked on in stabilization and support and skills and

understanding. Participants will be able to attend this treatment for up to 2 years. Group members will have a keyworker and will have 3 monthly reviews and regular check-ins. This will include Transition/Wellness Plans, risk documentation and other parts of the keyworker role ([Role of the Keyworker- MHAID Service MIDAS 63826](#)). The Psychiatrist who was part of OPGs would be involved for review where possible. This has yet to be discussed due to sickness.

Crisis cover: Community Programmes is unable to provide outreach, mobile services. There is no crisis cover for the patients enrolled in groups. The team will have limited capacity to manage a crisis situation and will refer to EPS for urgent care. CP may request CMHT review if the person is in continued repeated crisis and needs more support than the programme can provide.

Referral: Referral to Change and Growth would come primarily from CMHT Triage. We would expect the person to be in need of specialist mental health care, but with a focus on therapeutic input, rather than Psychiatric. Clients would not need to continue to have an open referral to the CMHT.

We may recommend the pathway to someone already engaged in the Support and Stabilization stream, which is currently also CMHT-only.

This will take effect from Tuesday 14th June 2022