



## **SAFAPLACE CONFERENCE 2019** **11th May Stoke Newington School**

### **“GETTING THE RIGHT HELP”**

#### **I. TRUSTEES REPORT TO CONFERENCE**

##### **About us**

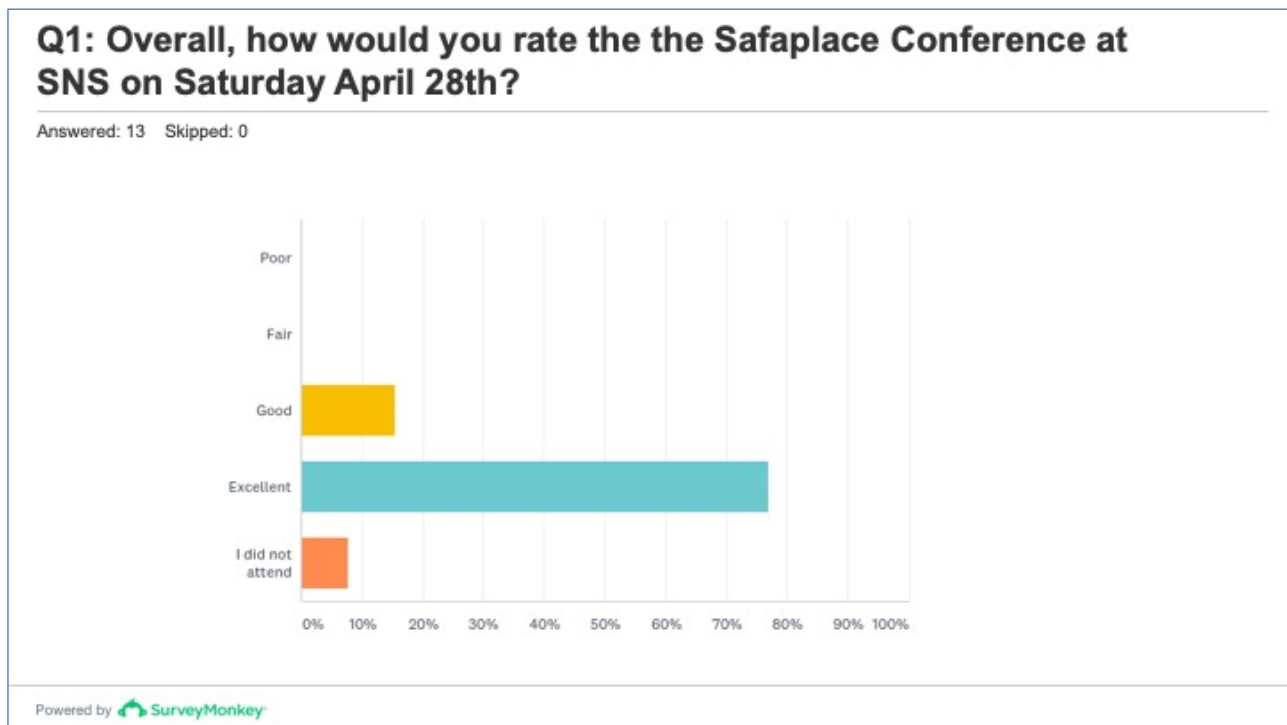
1. SAFAPLACE was created in 2017 after the deaths by suicide of 16-year olds Harry Lisle and Rachel Finke during a three month period; it grew from fundraising initiatives by school, friends and family, and exists in their memory.
2. Its aims are:
  - a. To make Stoke Newington a neighbourhood where young people can find help and support for all aspects of mental health
  - b. To make Stoke Newington School a centre for positive mental health awareness and to share and learn with other schools and the wider community.
3. SAFAPLACE became officially established as a registered charity no 1179202 in July 2018.
4. As of January 2019 the Trustees are: Jane Action, Salma Asokomhe, Michael Collins, Annie Gammon, Sarah Finke and Rose White.
5. The Trustees have benefitted from the support of a number of Associates over the course of 2019: Richard Allen, Antonia Canning, Skye Fitzgerald McShane, Kathy Manners, Spike Richards. They would also like to thank Claire Henshaw and Fran Plowright for their significant contributions.

##### **Activities ongoing in school**

6. During this year mental health training has continued for Stoke Newington Staff, with a particular focus on identifying emerging mental health issues and giving primary care. Students have been trained as peer listeners and take part in regular wellbeing tutor group activities. Regular parents' forums continue being held in order to help parents support their children's mental health and manage the pressures of modern-day teenage life. The leadership team has ensured the school improvement plan has specific targets for wellbeing, aiming that the school's ethos continues to be high achieving but also caring, with wellbeing as a high profile aim. . The school is making strong progress towards gaining the recognised kitemark for positive mental and emotional health activities, with Michael Collins leading these initiatives. The school has also supported other settings in their work to enhance wellbeing.
7. Safaplace has funded a 'Stokey Stars' reward scheme for teachers and is exploring a joint piece of work with the Education Support Partnership.

## Activities over the course of 2018-9

Fig 1. Conference 2018 Feedback



8. The first SAFAPLACE Conference was held on Saturday April 28<sup>th</sup> and was attended by 150 participants. Eleven workshops were run by support organisations including the Amy Winehouse Foundation, CAMHS, MerseyCare, Papyrus, MHFA England and others. Jonny Benjamin MBE and Dr. Chris Van Tulleken hosted the plenary sessions. The clear direction coming from the plenary sessions discussions was that we need to be listening to and asking young people themselves about the most effective forms of action.
9. Recommendations from the 2018 Conference discussions are attached as Annex 1, and have been used to inform SAFAPLACE's work. They covered training, changes for schools and the health services, and wider government policy.
10. Feedback from the Conference was low, but very positive (see Fig 1 above); comments received from those who provided evaluation said that SAFAPLACE should
  - c. Make the Conference more diverse with participants from the wider community
  - d. Lobby to reduce academic pressure
  - e. Support young people and their parents
  - f. Prioritise mental health in the school
  - g. Continue its work building links between all of those who deal with young people's mental health
11. Following the Conference in 2018, the SAFAPLACE website was launched and mailing lists established.

12. In May 2018 the “Big Night Out” dance raffle and auction organised by Claire Henshaw and other volunteers raised just under £4,500
13. In July the SAFAPLACE reflective garden at Stoke Newington School was formally opened. Pupils were involved in ideas for playground development, of which this was one part. Rose White led this work. A local garden designer and a community digging team assisted, and a furniture designer made benches. The garden, once a piece of overgrown and unused playground, is now being used by pupils to sit and talk. It is also hoped that it can be used as a community resource.
14. In September 2018, a series of “Look up” pop-up events took place in partnership with Safaplace, in the local community. These effective fundraising and awareness-raising events, hosted and curated by DJ Gilles Peterson, took place in the gallery by Stoke Newington Library and in the Old Church. 360 school pupils were involved. Interviews highlighting mental health with musicians and artists included evenings with Goldie, Jordan Rakei, Colleen Cosmo Murphy, James Lavelle, The Connor Brothers and Yazmin Lacey amongst others, as well as sell out performances from Jordan Rakei, Yazmin Lacey, SK Shlomo, Aaron Unknown, Sophia Thakur and more. Press coverage came from Time Out, The Times, Islington Gazette, Evening Standard, The Quietus, Hackney Citizen, Clash Magazine, Mixmag, DJ Mag, amongst others, reaching thousands. Fran Plowright of Create Jobs provided a team of young communicators. 200 local people attending the opening event, 400 paid to come to interviews in the evening, 600 attended gigs at the Old Church and 350 came to the closing party. A pop-up shop was open for a week. A 4k donation was also made by Tuckshop Music. in total this raised just over £20k; an additional very generous anonymous donation was also received.
15. The Trustees would like to record their sincerest thanks to all the artists, organisers, volunteers and the community. Special thanks went to Gilles Peterson for being the lynchpin – and putting in so much of his own time, and to Claire and Lee Henshaw who planned the “Look Up” events.

## **Looking forward**

16. In 2019-2020, SAFAPLACE plans to progress in two ways, as in a and b below. At the same time, we are aware that to effect practical change, we need to look at ways we can truly impact what happens to our young people. Thus, we believe that there is a third avenue to consider, which would mean pursuing a campaigning goal. A proposal is attached for the Conference’s attention.

### **Safaplace’s three-tier strategy**

- a. Firstly, SAFAPLACE will continue building links in the community and raising awareness, working with our school and other local organisations to fund lower-cost activities where Trustees believe it can make a difference; e.g. this Conference would fall into this category, as would work on the reflective garden.
- b. Secondly, SAFAPLACE is keen to enter into strategic partnerships with other organisations to roll out wider impactful projects. For example, we are currently considering a drama project which would be implemented in conjunction with the Tavistock Institute of Human

Relations. The Look-Up project would also be an example of this work. Project proposal forms are available at this Conference and on our website (under the 'About' section) for any interested organisations.

- c. Thirdly we pursue a campaigning goal, which for the upcoming period we propose should focus on the transition from child to adult mental health services, but which should also look at the transition from primary to secondary school where possible.

## II. SAFAPLACE CAMPAIGN PROPOSAL: Lost in transition

### Introduction

*“Our daughter was passed into the care of AMHS. She was to be transferred into a General Adult Psychiatric ward. It was agreed she would receive some support from the Eating Disorders unit. In reality this was 1 hour a week. To make matters worse when she arrived, she was still being fed through the NGT (a feeding tube), however none of the staff were trained to use it so they had to remove the tube. Although we cannot fault the staff on the ward, she was terrified, isolated from her peers and her anorexia was able to run riot. The staff tried to support her with eating but they had no specialist training. Even they themselves knew it was not the right place for our daughter and did not really know why she was sent to them.”*

1. This is what happened to one young woman when her 18<sup>th</sup> birthday meant she could not stay in her eating disorders unit. Her story is sadly not uncommon. We will also hear from a student-led charity “My Mind Matters Too” at the Conference, which is working to improve how transition works in higher education.
2. Transition to adult mental health services takes place at a time when a young person can feel abandoned in facing the multiple challenges associated with moving towards adulthood. Not least of which, can exam stress, leaving home and finding the next steps in relationships and work. For these reasons it is essential to turn the gaze of mental health services, other services for young people, and commissioners towards addressing transition effectively as doing so will reduce young people's vulnerability and considerably improve their life chances.
3. It is estimated that around 15% of under 18s have a diagnosable mental health problem. Even where young people are receiving support from CAMHS up to a third of young people drop out of care at transition<sup>1</sup> to adult mental health services. For those who do move to adult services they can find themselves receiving care in unsuitable settings with only 4% receiving an ideal transition.<sup>2</sup> Consequently many young adults find statutory services inaccessible or unresponsive to their specific needs and fall through the gaps between Child and Adolescent Mental Health Services (CAMHS) and Adult Mental Health Services (AMHS).

---

<sup>1</sup> Transitions of Care from Child and Adolescent Mental Health Services to Adult Mental Health Services (TRACK Study): A study of protocols in Greater London, Singh et al, NIHR, 2008.

<sup>2</sup> Branch, H.S.I., 2018. Investigation into the transition from child and adolescent mental health services to adult mental health services.

4. For these reasons SAFAPLACE proposes to take up being “Lost in Transition” as a campaigning issue - to highlight the inadequacy of service transition, and to campaign for change. In this way SAFAPLACE can reach out from its base and support in Stoke Newington School and the Learning Trust to draw in other agencies and interests in addressing the challenge of teens being “Lost in Transition”.

## Background

5. The quotations below are drawn from academic and practice-based articles and policies:

*“Transition is different from transfer, a continuous process not a single event. Good transition should be a coordinated, purposeful, planned and patient-centred process that ensures continuity of care, optimises health, minimises adverse events, and ensures that the young person attains his/her maximum potential.”<sup>3</sup>*

*“Youth experience a dramatic culture shift between CAMHS and AMHS which can be mitigated by individualised and flexible approaches to transition. Youth have valuable perspectives to guide the intelligent design of mental health services and their perspectives should be used to inform tools to evaluate and incorporate youth perspectives into transitional service improvement”<sup>4</sup>*

## What we know

6. The UK’s Independent **Healthcare Safety Investigation Branch** in July 2018 identified:
  - a. Lack of shared care between CAMHS and AMHS during transition
  - b. Need for flexibility over age at transfer (e.g. 18-25)
  - c. Only 4% receive an ideal transition. The approach is not standardised
  - d. The benefit of introducing tools for structured conversations on transition
  - e. Early intervention for young people reduces the impact on the young person and demands on services.
  - f.
7. The **‘Green Paper trailblazer project 2019’** proposed the following, and we may need to ask what role the new support teams will play in transition processes.
  - a. Schools and colleges should be incentivised to identify and train a Designated Senior Lead for mental health.
  - b. The finding of new Mental Health Support Teams, which will be supervised by NHS children and young people’s mental health staff.
  - c. A four-week waiting time for access to specialist NHS children and young people’s mental health services pilot is proposed.

---

<sup>3</sup> Singh, S.P. and Tuomainen, H., 2015. Transition from child to adult mental health services: needs, barriers, experiences and new models of care. *World Psychiatry*, 14(3), pp.358-361

<sup>4</sup> Broad, K.L., Sandhu, V.K., Sunderji, N. and Charach, A., 2017. Youth experiences of transition from child mental health services to adult mental health services: a qualitative thematic synthesis. *BMC psychiatry*, 17(1), p.380

## Problems to be addressed

8. Young people are already facing multiple complex issues in transitioning to adulthood at this point in their lives<sup>5</sup> - it is possibly the worst moment to change the relationships and the support achieved through CAMHS. Making this a real transition rather than a transfer is essential. Our local understanding and a review of reporting of issues has led us to believe the following issues need to be addressed:
  - a. Sudden and dramatic transfer on and around the 18<sup>th</sup> birthday
  - b. Having to deal with mental health issues post-18, while still at school
  - c. Becoming lost in transition - people might not transfer - abandonment - high failure rate of transfers.
  - d. Higher Education institutions awareness of, and response to, young peoples' mental health challenges is patchy. Mental Health support on campus has been described as "not fit for purpose"<sup>6</sup>
  - e. A lack of knowledge and understanding on the part of potential employers of young people, with a need support around apprenticeships and other forms of job training etc.

## Campaign objectives for SAFAPLACE

9. Achieving a good transition to adult services is a multi-agency challenge and requires an established protocol. It should address continuity of care; parallel care; transition planning meeting; and information transfer at an established standard. We believe some campaigning objectives for our charity could be:
  - a. Calling for research to discovering what young people, and their families, want from transition in Hackney
  - b. Campaigning for flexibility on age at transition and /or extending support to 25 to mirror leaving care support
  - c. Identifying which effective evidence-based practice is in use in Hackney e.g. are there transition standards/protocols covering: continuity of care; parallel care; transition planning meeting; and information transfer?
  - d. Promoting multi agency transition strategies – making transition a more significant part of a combined CCG, CAMHS, AMS and Learning Trust strategy within Hackney
  - e. Improved transition awareness across schools and young people's services
  - f. Calling for support for parents and carers at this key time
  - g. Working to improve pastoral support in Higher Education
  - h. Strengthening employers, and apprenticeship schemes, awareness and capacity to respond to young people's mental health issues.

### **10. The Safaplace Conference is invited to comment and provide input, advice and ideas on this proposal.**

---

<sup>5</sup> There can many compounding issues such as: offending behaviours, substance misuse, parental conflict, leaving care, failing relationships, long term medical conditions, etc.

<sup>6</sup> <https://www.theguardian.com/education/2015/dec/14/majority-of-students-experience-mental-health-issues-says-nus-survey>).

**Annex 1: Follow up actions from workshops SAFAPLACE conference 28-4-18**

<b>For students by schools</b>	<b>Training for teachers/staff</b>	<b>For health service</b>	<b>For schools</b>	<b>For all adults</b>	<b>Wider policy</b>
How will pupils know that they might need help? Age appropriate training integrated into curriculum.	Suicide awareness – trained to be part of preventing suicide	Antidepressants: the non-pharma treatments are hard not easy; need for prescribing and support and investment in exercise/talking therapy/diet	Questioning in class – avoid embarrassment?	Lead by example – talk about your own mental health	Need a government minister responsible for suicide/mental health
Mindfulness (choice to do this)	Mindfulness	Question industry influence for diagnostics – phq-9, dsm for treatments/evidence	Striking a balance between behaviour management and positive mental health	Rupture and repair – model this to children	Integration of support services into schools; normalise; include primary schools
Starting mental health awareness in year 6 and 7	Mental health first aid training	The medication for depression may work for some people – do not stop the drugs suddenly	Social media Boys' mental health	Being around – open door – indirect communication – show curiosity	
Mythbusters on drugs: nuances and detail behind drugs are “just bad”; delivered by credible young people rather than authority	Keeping training updated – things change!		Enjoyment of school meals/nourishment	Relate mental to physical health and remove any embarrassment Remove any stigma	

Self-care – wellbeing programmes to help with self esteem	Awareness of the relationship between drugs, anxiety and mental health. Help to understand and manage this better.		Upload resources/links from MHFA onto Safaplace website	Have hope – they are listening even if they don't seem to be	
Awareness of the relationship between drugs, anxiety and mental health. Help to understand and manage this better.			Mental health needs to be core to culture in schools; how to bridge the gap between cultural/ethnic divides	Awareness of the relationship between drugs, anxiety and mental health. Help to understand and manage this better.	
Use students as mindful role models/ambassadors				The words that we use – how do we describe suicide; not talking about it as we feel awkward; to feel confident to talk to young people and listen	
Raise awareness of eating disorders in school – no taboo – including primary				Small talk saves lives	
				Create/encourage talking about feelings at family/school, at an early stage	