

# Alternatives to Crisis Programme Individual Service Profile

## – Newport Safe Haven *(Isle of Wight)*

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## 1. Introduction

This Individual Service Profile expands on the information provided in the accompanying Final Report slide set. It looks at each Alternatives to Crisis (A to C) service in more detail, exploring service setup; how the service is staffed; what challenges the service has faced; what has worked well; and what has changed for the service over the lifetime of the evaluation. It also presents activity data for the service for the period 01 April\* 2022 – 30 June 2023, along with feedback from people who used the service, which was collected via the online and postcard surveys.

## 2. Methods

Information on each of the A to C services has been collected since July 2021, when scoping for this evaluation began. The evaluation team met with service managers and members of service staff on multiple occasions during the data collection period (01 April\* 2022 – 30 June 2023), and where appropriate, service visits were also arranged, so that the service could be seen in person.

Service managers and staff were also invited to attend and feedback through the Rapid Insight Events held in June 2022 and April 2023. At the end of the data collection period a follow-up meeting was arranged with each service to reflect on the challenges the services had faced, what had worked well, and how the services have changed during the evaluation period. This meeting also provided an opportunity to check that the evaluation had up-to-date information on the service set-up and staffing structure. Discussion logs were kept for each service meeting.

Feedback from the people who used the services was collected via interviews, online surveys and data collection postcards. The online surveys were circulated between March 2023 and June 2023. The postcards and ballot boxes were distributed to the services in March 2023 and collected in June 2023. Both the survey and the postcard included short multiple choice style questions and free text questions, where people could provide further comments about their experience of the service. This Individual Service Profile includes the feedback from both the online survey and the data collection postcards. The findings from the interviews are presented separately in Appendix V.

The service meeting discussion logs, the findings from the Rapid Insight events, the feedback from the multiple-choice survey questions, and the quantitative activity data collected through the Standardised Data Collection Tool, has fed into the information presented below.

## 3. Data reported

The evaluation can only report against the data fields that were provided, furthermore if the quality of data submitted was insufficient for analysis to be performed, it was not included. Please see slides 25 -29 in the Final Report slide set for further information on evaluation challenges and data issues.

*\*Newport Safe Haven was a late addition to the evaluation, and therefore commenced the data collection in October 2022.*



## 4. Service information – Newport Safe Haven

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### Newport Safe Haven

Wellbeing Centre, 7 High Street, Newport, PO30 1SS



## TWO SAINTS

#### 4.1. Service Overview



- **Safe Haven** – for **adults aged 18+** experiencing mental health crisis. The service can be accessed **face-to-face, over the telephone, or by e-mail**. Open access, no referral or prior appointment required.



- **Open 365 days a year, 17:00 – 22:00, Monday to Friday; midday to 22:00 on Saturday, Sunday, and bank holidays.**



- The service is **staffed by Two Saints**.



- The service is based in **Newport on the Isle of Wight**.

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#### 4.2. Newport Safe Haven in more detail

The service relaunched under the management of Two Saints Limited in November 2019; however, there has been a Safe Haven in Newport since 2017. The service operates out-of-hours and is based within the Wellbeing Centre. It provides a safe space for people experiencing a mental health crisis. People can access the service by telephone, in person or by e-mail. People are encouraged to call ahead before they drop in, but they do not have to.

At present when people arrive at the service they must wait outside, but the Safe Haven team are hoping to open a reception area when the building owner redevelops the space. When someone is new to the service they are met by two members of staff, this allows one person to take notes. Once someone is known to the service, they can be seen by one member of staff at a time.



### *Staffing model*

- Two members of staff on each shift, with the addition of the Team Lead a couple of days a week.

When fully staffed, the team is made up of four members of staff along with the Team Lead, Mark Gaskin, however they are currently down to two members of staff plus Mark. There are no dedicated Peer Support Workers at the service however, many of the team have lived experience of mental health.

The service does not have any clinical staff on site although the service has a good connection with the Single Point of Access team, which can connect them with the mental health team at St Mary's Hospital; there is also NHS111, the local authority, or Adult Services and Safeguarding, depending on the support they require.

The team arrive at the service around 15:00 on weekdays to carry out follow-up calls, and then they leave at 22:00, unless there is a late presentation in which case the member/s of staff will be slightly later finishing.

The service has had challenges with different recruitment agencies for providing 'relief staff', so they try and keep their own bank of staff as much as possible. Unfortunately, the bank staff do not have access to the main systems, which limits their input.

If they cannot find people to fill the shifts, then the service moves to telephone only support.

### **4.3. Challenges experienced by Newport Safe Haven**

Mark Gaskin, Team Lead at Newport Safe Haven and Laura Jordan, Contracts and Performance Manager, Two Saints Limited, both described several challenges that the service has faced:

#### *Staff recruitment and staff retention*

*"There is currently a big piece of work in central services focusing on staff retention and looking at organisation benefits, it spans across Two Saints staff and services."*

Laura Jordan, Contracts and Performance Manager.

There were several issues around staff retention that Mark and Laura put forward:

- *There are other jobs available with better pay and less responsibility.*
- *Out-of-hours work is unsociable.*
- *The 22-hour contract is above the threshold for those on benefits.*
- *The nature of the work can deter people – supporting people in crisis can be very challenging.*
- *Feeling a sense of fulfillment in the role can be difficult, as you tend not to see the result for the person you supported.*



- *As the work is not clinical, and there are no qualifications required, it can be seen as a stepping stone into mental health services, giving people the opportunity to gain experience and then move onto another role.*
- *People tend to prefer being bank and agency workers as they have greater flexibility and can choose their hours and when they work.*

#### *Changes within the NHS and the mental health support available*

The service has seen an increase in regular attenders, as they no longer have the support from the NHS services that they used to have. For instance, there used to be a crisis line available for people to call seven days a week which is no longer available, therefore the Safe Haven team feel that they now fill this gap in service provision.

#### *Increase in the number of challenging cases*

The service has seen an increase in contacts from people at a critical point and at risk of harm.

#### *Police attendance*

Challenges with police attending when required, despite the police station being next door, purely down to pressure on police resources.

#### *Knowing where the service sits within the mental health pathway, and being recognised by NHS services as sitting within the pathway*

The service has always tried to remain non-clinical in their approach and in the environment they provide, as this is important to many of the people who use the service. However, it is necessary for the Safe Haven to link in with NHS services and it can be difficult to be recognised by those services as part of the pathway. Laura gets involved in the Mental Health Transformation Programme. However, in terms of the practical changes and improvements being made, the service has felt as though they have been shut out, as a third sector organisation.

#### *Limited funding*

There is very little surplus available in the contract funding, so the service struggles to do anything different or new, such as creating different environments, or looking at new ways of advertising the service.

### **4.4. What has worked well for Newport Safe Haven?**

Mark Gaskin, Team Lead at Newport Safe Haven and Laura Jordan, Contracts and Performance Manager, Two Saints Limited both described the factors that they feel have worked well for the service:

- *“Being perceived by people as sitting outside of the NHS has been important. Offering support in a non-clinical setting. We find that people's barriers come down*



*as soon as they realise they are not walking into a hospital."* Mark Gaskin, Team Lead

- *The staff within service do not wear uniform.*
- *No NHS badge on the door.*
- *"Clients are aware the service is commissioned by the NHS, but they realise they will be supported differently to an NHS service."* Laura Jordan, Contracts and Performance Manager
- *"We are able to give people time to share in a supportive and safe environment."* Mark Gaskin, Team Lead
- The service prioritises quality interactions over quantity.
- The service has time to talk to people over the phone, *"Time in the moment so the person can offload."* Mark Gaskin, Team Lead
- The service has its own processes, *"We don't hit a lot of red tape, we can be more innovative and adaptive, there are less challenges or barriers than if we were in the NHS, which makes it easier."* Laura Jordan, Contracts and Performance Manager
- *"Staying put has been important. People now recognise where the service is based. There were conversations previously around moving into the Integrated Mental Health Hub (where the Peer Support Service is based) and being mixed in with other mental health services."* Laura Jordan, Contracts and Performance Manager

#### 4.5. How has Newport Safe Haven changed over the evaluation period?

- The service had recently added a mobile contact number to their offering, to allow WhatsApp conversations. It had not been circulated at the time of discussion but it had been added to a new leaflet.
- The service started working with a new recruitment agency, *"...as they are quick to get people into posts."*
- Due to pressures on community mental health services, the service had seen an increase in returning attendees, using the service on a regular basis.



## 5. Service activity data - Newport Safe Haven

The following data was collected between 01 October 2022 and 30 June 2023 by Newport Safe Haven via the evaluation's Standardised Data Collection Tool. The service was a late addition to the evaluation and therefore the data collection period was unfortunately six months shorter.

The service collected NHS numbers for 88 people, 50 attendances during the data collection period were recorded as anonymous or had invalid NHS numbers recorded, so it is not possible to determine how many people those attendances are associated with.

### Between 01 October 2022 and 30 June 2023 ...



- Newport Safe Haven **supported over 88 people, across 929 contacts**, with an average of 103 contacts per month and **an average of 3 contacts per shift**.



- The service saw 21 – 27 people each month.



- **89% of the contact** with Newport Safe Haven **was by telephone**, the remaining 11% was face to face.



- **9 individuals contacted Newport Safe Haven on more than 25 occasions each**.



- **71% (656/929) of the contacts made with Newport Safe Haven were to prevent escalation into crisis**. 22%, (206/929) were contacts from people in crisis, while only 1% (8/929) were recorded as maintaining recovery after a crisis. 1% (12/929) wanted someone to talk to, to reduce isolation/ loneliness. A further 2% (21/929) required information / advice about mental health services. The remaining 3% of contacts were recorded as 'other'.



- **The service was contacted or visited on 5 occasions by carers** seeking information and advice about mental health services or there to support the person they care for.

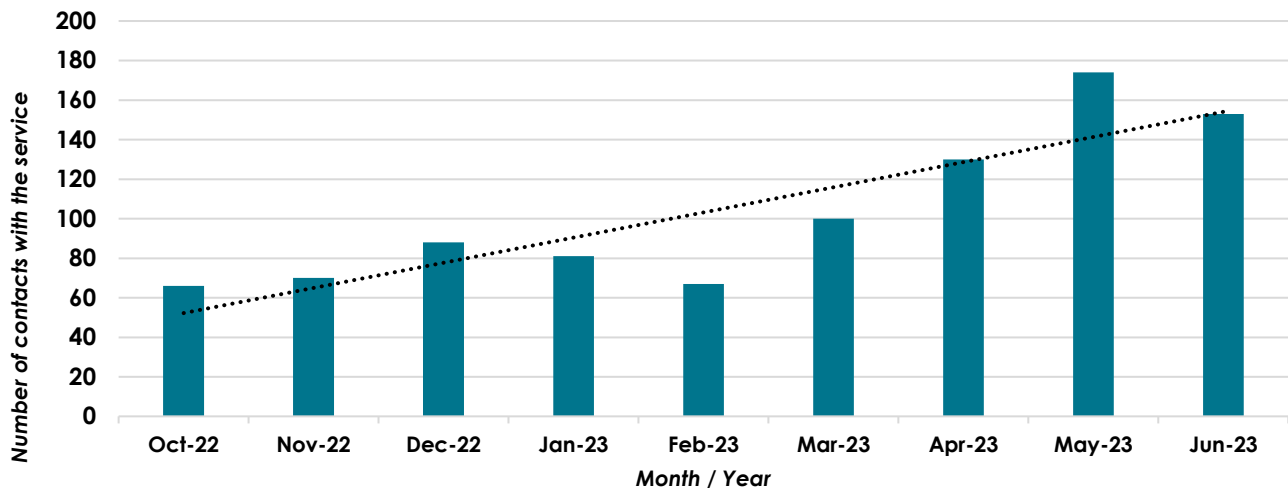






The following graph (figure 1) shows the number of contacts with Newport Safe Haven by month over the evaluation data collection period. The trendline has been added and demonstrates an increasing demand for the service over the evaluation period.

**Figure 1: Number of contacts with the Newport Safe Haven between 01 October 2022 and 30 June 2023, by month**



The word cloud in figure 2 below shows the reasons people contacted the Newport Safe Haven between 01 October 2022 and 30 June 2023. The size of the words reflects the frequency they were recorded. This data was recorded within the Standardised Data Collection Tool for the 929 contacts with the service. 67% of contact was due to low mood or anxiety.




**Figure 2: Word cloud showing the reasons people contacted the Newport Safe Haven for support**



## 6. Personal characteristics data – Newport Safe Haven

Personal characteristics data is only reported against the fields where there was 50% or more of the data provided. For instance, disability status was only captured for half of the people in contact with the service, the remaining individuals were recorded as 'unknown'. Religion or belief was only recorded for 8/88 people.

**Of the 375 people who contacted the Newport Safe Haven between 01 October 2022 and 30 June 2023 ...**

-  ➤ **52% (46/88) identified as female**
-  ➤ **73% (64/88) identified as White – British.** The remaining people were recorded as 'unknown' or were left blank.
-  ➤ The **average age** was **45 years old**.

The following figure (figure 3) shows the breakdown of gender identity by age band.

**Figure 3: Age band by gender identity for the people who contacted Newport Safe Haven between 01 October 2022 and 30 June 2023**

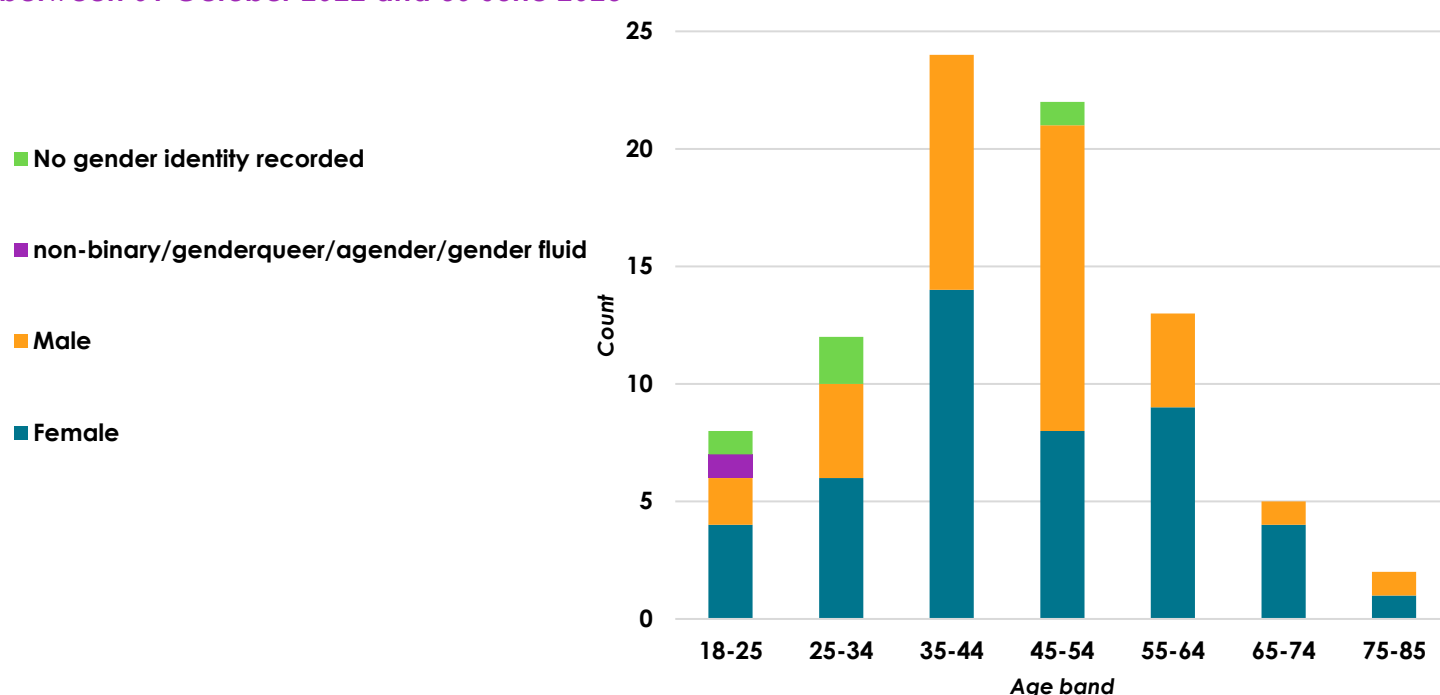


Figure 3 shows that the largest proportion of people who contacted Newport Safe Haven during the data collection period were males and females aged 35 to 44 years. The largest proportion of people who identified as non-binary/genderqueer/agender/gender fluid were in the 25 to 34 years age group.

## 7. Impact of the service on the people who use it – Newport Safe Haven

### 7.1. Adapted Subjective Units of Distress Scale (SUDS) for Newport Safe Haven

The Subjective Units of Distress Scale (SUDS) is a 10-point scale that was developed by psychiatrist Joseph Wolpe in 1969 to measure the subjective intensity of distress experienced by an individual. SUDS is measured based on the response given to the following question:

**“On a scale of zero to ten, where zero is the best you can feel and ten is the worst, how do you feel right now?”**

Health Innovation Wessex and the HIOW ICB Lived experience lead adapted the scale, providing a colour coded printable tool with supporting statements to reflect escalation of crisis (figure 4). Each service was asked to use the scale at the beginning and end of each interaction with a person, as a measure of the service's impact on emotional distress. Please see slides 21 and 22 in the Final Report for more information on the selection of Adapted SUDS for this evaluation.

**Figure 4: Adapted Subjective Units of Distress Scale**

10	Unbearable	<i>The worst distress, anxiety, fear or discomfort you have ever felt.</i>
9	Extreme	<i>“I am finding it hard to cope”</i>
8	Very distressed and uncomfortable	<i>“I am so upset that I am struggling to think about anything else”</i>
7	Strong feelings of distress	<i>“I am so upset that I am finding it difficult to function”</i>
6	Moderate - strong	<i>“How I am feeling is affecting my ability to focus on other things”</i>
5	Moderate	<i>“I feel uncomfortable, although I can still focus on other things”</i>
4	Mild - moderate	<i>“I am feeling more anxious than usual, and I am worried about how I am feeling”</i>
3	Mild	<i>“I am feeling anxious, and it is upsetting me”</i>
2	Minimal	<i>“I am feeling a little anxious or upset”</i>
1	Neutral	<i>“I am feeling OK”</i>
0	No distress or anxiety	<i>“I am feeling calm and relaxed”</i>

Newport Safe Haven reported Adapted SUDS scores for 99% (916/929) of the contacts made with the service. The staff used the words the person was saying to describe their crisis as an indicator of their distress and assigned the score on their behalf using the scale and descriptors in figure 4.

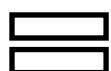
Figure 5 shows Adapted SUDS scores on arrival at Newport Safe Haven versus departure.

**Figure 5: Adapted SUDS on arrival vs departure**

Level of distress on arrival		Level of distress on departure										
		0	1	2	3	4	5	6	7	8	9	10
0	No distress or anxiety	10										
1	Neutral	7	16									
2	Minimal	10	66	2			1					
3	Mild	11	165	6	1							
4	Mild - moderate	11	132	31	7	2						
5	Moderate	7	96	61	14	3	1					
6	Moderate - strong		53	36	17	5		2	1			
7	Strong feelings of distress		19	19	18	9	4	6	4			
8	Very distressed and uncomfortable		4	9	11	7	3	3	1	7		
9	Extreme		3	2	1	1		4			3	
10	Unbearable							1			1	2



- **94% (864/916) of the adapted SUDS scores showed a decrease in level of emotional distress.**



- 5% (50/916) reported no change in their level of emotional distress.



- <1% (2/916) of the adapted SUDS scores showed an increase in level of emotional distress.



- The average **change in Adapted SUDS score following contact with the Newport Safe Haven was a decrease of 2.9**. Average score on arrival was 4.5, whereas at departure the average score was 1.6.

## 7.2. Feedback from the people who contacted Newport Safe Haven for support

Online surveys and data collection postcards were used to collect feedback from people contacting Newport Safe Haven for support. The survey and postcard combined both short answer (multiple choice) questions and longer free text questions. The online surveys were circulated between March 2023 and June 2023. The postcards and ballot boxes were distributed to the services in March 2023 and collected in June 2023. The following table (table 1) shows the number of responses that were collected.

**Table 1: Number of responses to survey and postcard data collection**

Service	Number of postcards completed	Number of online questionnaires submitted	Total
Newport Safe Haven	7	0	7

Below provides a summary of the findings from the short answer questions:



- **100%** (7/7) respondents who have been in contact with Newport Safe Haven **rated their experience as 'excellent – even better than I expected'.**



- When asked ***"If the Newport Safe Haven had not been available, where might you have gone for support?"***. The seven respondents answered as follows:
  - 2 x would have contacted the Crisis team.
  - 1 x would have contacted 999.
  - 1 x would have contacted 111.
  - 1 x would have contacted the Samaritans.
  - 1 x would have contacted their GP.
  - One person simply stated: "No other service would listen".

The following are the longer free text questions from the online and postcard surveys:

- "What difference has accessing the service made to you?"
- "What has the service helped you with the most?"
- "Was the service easily accessible?"
- "What would make the service better for you?"

Free text comments were left by four out of the seven respondents. The free text comments were brief but represented positive sentiments towards the service. The comments about the services were:

*"Friendly environment, really helpful, we now have a plan. Thank you so much – fabulous."*

*"Of all the services on the island this is the best one, they are more approachable and understanding."*

*"The first time here was an excellent experience – now I have much more confidence to come back. The plan was very helpful."*

*"Very accessible, very supportive staff."*

## 8. Summary – Newport Safe Haven

Newport Safe Haven provides an out-of-hours crisis support service based in Newport on the Isle of Wight. The team who run the service feel the non-clinical environment is key to the service's success.

The reduced amount of data available for this service due to the shortened data collection timeframe and the data quality issues have restricted data analysis.



Nonetheless the attendance data does show an increase in demand in line with what was described by the service team. It is also worth noting that the team is currently at reduced capacity due to the recruitment issues described in section 4.3. This is likely to impact on how people can access the service, as the team operate as telephone only if there are insufficient staff available to open the service.

Newport Safe Haven has demonstrated that it is effectively able to support crisis de-escalation, as shown by the average 2.9 decrease in Adapted SUDS score. Furthermore, the feedback from people who used the service, although only a very small sample size, is positive.