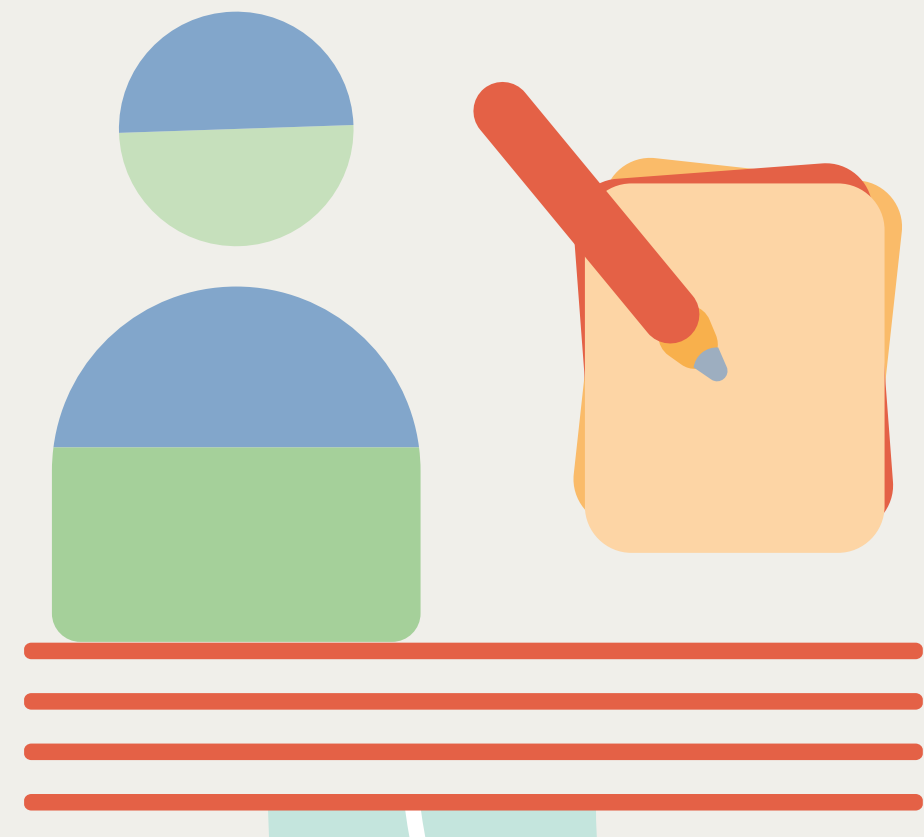


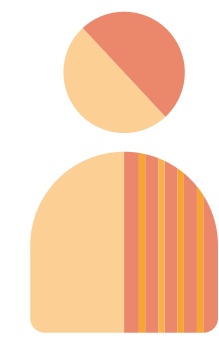
Using Stories Of Recovery To Redesign Services



Purpose of Project

Dundee Mental Health Officer (MHO) Team wanted to involve people with lived experience of mental health challenges in their work to improve the service and better support people in their recovery journey.

Mental Health Officer (MHO) – a Scottish role. A social worker with specialist training and experience in working with people living with mental health challenges and subject to compulsory care and treatment.



Previous engagement was focused on 'service user feedback surveys' and had proved to be unsatisfactory. The surveys highlighted problems but did not provide solutions. For the people engaged in the surveys the lack of involvement in future planning meant that they did not feel heard or valued.



Seizing Opportunity

Some of the MHO Team felt that a different approach was needed and were enthused by some of the early work undertaken by Making Recovery Real in Dundee – a collaboration of Scottish Recovery Network (SRN), local organisations and people living with mental health challenges.

They approached SRN to see if Making Recovery Real in Dundee could help them engage people more effectively in service design. SRN and Making Recovery Real in Dundee agreed to work with the MHO Team.

Attracted by the project's focus on sharing recovery stories and on how stories could be used to effect change in policy and practice, the MHO team approached Making Recovery Real in Dundee to help them engage people in service design.



Process/Project

The approach was to bring the MHO Team and people involved in Making Recovery Real who had experience of compulsory care and treatment together to explore how the service could better support recovery. The events were designed and facilitated by Making Recovery Real to ensure that all were involved as equal participants. Each event built on the previous one and a series of ideas and options were generated.

The process was informed by recovery values:

- Connecting people as equals – recognising and addressing power imbalance
- Valuing lived experience
- Appreciative approach – focused on strengths to be built on as well as areas of be developed
- Not just about the service but looking beyond it for solutions

Connecting people as equals

Valuing lived experience

Appreciative approach

Looking beyond the service for solutions

Impact

Results include:

- New approach to first contacts
- Clear MHO role in promoting alternatives to in-patient treatment
- Better and more effective links with third sector organisations – more opportunities for people to move on
- Work to develop paid peer roles to support people to move on from compulsory treatment – co-design is leading to co-production of the service.

The MHO Team are now firmly part of Making Recovery Real in Dundee and the redesign of their service is taking place within this context. The development of peer roles in the service is part of a wider development being taken forward with Making Recovery Real in Dundee and the recently established Dundee Peer Recovery Network.

Learning

- 1 MHOs did not own or control the process. This enabled them to support it by getting involved on an equal basis and not feel defensive. This enabled them and others to have open and honest discussions.
- 2 The process highlighted strengths and strong values as well as areas for development – this helped to maintain the motivation of the MHO Team and others in what is, and will continue to be a long process of change.
- 3 Bringing the MHO Team together with local organisations and people unlocked a significant resource for them which has led not only to new developments but greatly increased opportunities for people to move on.
- 4 Placing lived experience at the centre highlighted new solutions to the issues faced by the service. A process of co-design has led to a commitment to co-produce the service i.e. people with lived experience not only informing service design but involved in service delivery.

Making Recovery Real partners worked with the MHO Service to plan and deliver two events in March and June 2017 where people with experience of using and providing the MHO service came together to look at the service and how it could better support recovery. These were some of their thoughts.

