

# GIRFT webinar: Strengthening community mental health rehabilitation to eliminate out of provider placements

11<sup>th</sup> July 2022

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Link to webinar recording and MH rehabilitation national report on FutureNHS (registration/login required)

- Webinar - [Webinar Calendar - Getting It Right First Time - FutureNHS Collaboration Platform](#)
  - National report <https://future.nhs.uk/GIRFTNational/view?objectId=130557637>
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## Webinar questions answered by Dr Sridevi Kalidindi

Please note: We received many requests and offers to share and exchange best practice during the webinar. We are in the process of organising a community/forum for people to share examples of local practice, hosted on the FutureNHS platform. We will share details of that widely once it is up and running.

### 1. I am keen to contact other OTs who work in rehabilitation community. Does anyone know of professional networks?

Please contact Clair Haydon, Consultant OT and Clinical Director for Mental Health Complex Care for North West England [clair.haydon@nhs.net](mailto:clair.haydon@nhs.net)

### 2. What criteria are used for acceptance into community rehabilitation services in other areas?

*This is something that can be discussed when we have set up a community/forum for people to share examples of local practice (see note above).*

### 3. I am keen to link in with any other hybrid (inpatient and community) rehab service, particularly where the staff work across both?

*We have reached out to colleagues who are happy to be contacted about their rehab services.*

- Sue Field [sue.field2@slam.nhs.uk](mailto:sue.field2@slam.nhs.uk)
- Christina Kyriakidou [christina.kyriakidou@slam.nhs.uk](mailto:christina.kyriakidou@slam.nhs.uk)  
South London Partnership
- Amrith Shetty [amrith.shetty1@nhs.net](mailto:amrith.shetty1@nhs.net)  
Cheshire & Wirral Partnership
- Helen Killaspy [h.killaspy@ucl.ac.uk](mailto:h.killaspy@ucl.ac.uk)  
Camden & Islington.

**4. I would be interested to know of any other areas where assertive outreach teams are embedded into this approach?**

*Again, this is something that can be discussed when we have set up a community/forum for people to share examples of local practice (see note above).*

**5. Please could you share some example service specifications that areas have developed for community rehab teams?**

**6. We have an AOT team, but no community rehab teams in our area. I feel that we need both and should not amalgamate them. What are the panel's thoughts on this and are there other areas that have managed this successfully?**

**7. Does anyone know of the launch date of the RCP Community Rehab Accreditation Scheme?**

*Please contact Helen Killaspy ([h.killaspy@ucl.ac.uk](mailto:h.killaspy@ucl.ac.uk)) at Camden & Islington.*

**8. Will ICSs change anything?**

*Yes - all ICSs need a clear mental health rehabilitation plan that follows national guidance. There is an opportunity to work in a more integrated way using a place-based model of care.*

*Provider collaboratives across trusts, which include housing providers, VCSEs, LAs, have been shown to be good models of care for rehab. It is important to ensure rehab money from the LTP community mental health framework and money from rehab out of area placements coming back into local services is kept developing the rehab pathway locally.*

*Any remaining funds are to be kept within the mental health services budget. Each ICS should have a couple of key metrics on their data dashboards at board level, such as the number of rehab people supported within local services (as opposed to out of area).*

**9. What are the benefits of a specialist team over a dedicated function?**

*Specialist teams have better outcomes, generally. However, when it is a specialist team, it is important to manage patient flow (people being admitted into the team and discharged out of the team). The specialist team should also provide an advisory function to other teams so rehabilitation principles and care can be given much more broadly across the mental health system.*

**10. Is NHSE considering the needs of SMI patients within community forensics teams?**

*Please contact Mayura Deshpande ([mayura.deshpande@southernhealth.nhs.uk](mailto:mayura.deshpande@southernhealth.nhs.uk)) who is the national lead for this work*

**11. I would be very interested in knowing further information on this transformation agenda?**

Please refer to the [GIRFT mental health rehabilitation national specialty report](#) and the [LTP community mental health framework](#).

**12. What type of things are people choosing to use PHBs for?**

*This is very varied and in place to support personalised rehabilitation - examples include paying for psychological therapy, football tickets, educational courses, buying a laptop, and so on, to support that person impactfully.*