Placement Innovations at Sheffield

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What we will cover

• The background
• The SYHA placement
• Public Health placement
• City of Sanctuary placement
WHERE WE WORK
This map shows the different areas where we have homes.

We don't just house people in South Yorkshire; we have homes throughout North, South and West Yorkshire and across both Derbyshire and Nottinghamshire.

3,987 of our homes are simply for rent, and a further 1,709 of our properties include extra support from caring staff with specialist knowledge.

60% of our work is more than housing; we work with people – both in our properties and in their own alternative accommodation – to help them retain their independence and live their life to the full.
SYHA Placement

- Background discussion and negotiation
- Supervised by 2xCPs plus SYHA staff member
- Scoping exercise and lit review
- Benefits of psychologically informed environments (PIEs)
Intervention

- Intro to CAT staff training
- CAT staff reflective practice groups
- Weekly sessions: re-formulation, patterns and exits
- Aim of increasing understanding, reducing burnout and re-traumatisation
Evaluation

- Outcomes measures of work-related QoL and burnout
- Weekly qualitative measure of confidence and stress
Qualitative Feedback Themes

- Constructive challenge (colleagues)
- Greater understanding (customers)
- Thinking and responding differently (customers)
- Emotional release (personal)
Broader Outcomes

- Impact of CP on those not otherwise accessing services
- Discussions re creation of a CP post at SYHA
- Closer relationship between NHS Trust and SYHA and plans for future joint working/placements
Public Health Placement

• What is public health and why might we consider a placement there?

• How we started

• Developments so far
What is Public Health?

“We exist to protect and improve the nation's health and wellbeing, and reduce health inequalities” (PHE website)

Clinical psychology priorities??

DCP conference 2017 - top 2:

● ‘working with/influencing government/policy makers’
● community psychology / genuine co-production’
● also ‘public health/prevention’ (plus primary care, training, supervision, consultation)
How we started

Director of Public Health Sheffield - contacts and conversations.

Finding areas where psychology could contribute - link with CP in PH Derbyshire

Other DClinPsy placements in PH

Seeking interested (and able) trainees
So far… (very early days!)

Defining competencies….(incl. leadership) and outcomes for placement

Scoping, shadowing, learning the language,

Projects: ACEs, Suicide awareness, training, ??
City of Sanctuary

Creating a Culture of Welcome
The placement beginnings

- Approached by experienced CP/Head of service who volunteers there
- To work within a clinically informed community psychology approach
- Trainee to discover what is wanted and possible- centre and people using it
- Reflecting team model of supervision
This may include...

Running groups and activity sessions with a wellbeing focus
Developing information and educational resources
Organising events
Developing service user initiatives
Supporting the development of new local mental health and asylum network

Training for NHS staff and others

Evaluation
What we’ve learned so far....
Trainee Factors

- Needs to be robust, on track and able to cope with uncertainty
- Interested in developing organisational/leadership competencies
- Learning to speak a new language (e.g. customers not SUs)
- Adapting and responding to cultural differences
Supervisor Factors

- Positive relationships
- Trust, honesty and commitment
- Experienced in roles
- Senior service level input into training
- Working at the organisational and strategic level
Course Factors

• Defining the experience and adapting placement documentation
• Measuring impact (short and long term)
• CT role in keeping focus on learning framework
What has been your experience?